Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 1 of 70 Document Fill in this information to identify your case: FILED United States Bankruptcy Court for the: UNITED STATES BANKRUPTCY COURT Northern District of Illinois v NORTHERN DISTRICT OF ILLINOIS Case number (# known): Chapter you are filing under: FEB 03 2016 ☑ Chapter 7 Chapter 11 JEFFREY P. ALLSTEADT, CLERK Check if this is an ☐ Chapter 12 Chapter 13 PS REP. - KM amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Simone government-issued picture N/A First name identification (for example, First name your driver's license or passport). Middle name Middle name Robertson Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you N/A have used in the last 8 First name First name years Include your married or Middle name Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name

(ITIN)

3. Only the last 4 digits of

your Social Security number or federal Individual Taxpayer Identification number

9 xx - xx -___

- xx - <u>8 3 1 5</u>

9 xx - xx -_____

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 2 of 70

Debtor 1	Simone Rob First Name Middle	Name Last Name		Case number (# known)
	**************************************	About Debtor 1:		
and Em	siness names ployer cation Numbers ou have used in	☑ I have not used any busi	iness names or EINs.	About Debtor 2 (Spouse Only in a Joint Case): I have not used any business names or EINs.
the last	8 years ade names and	Business name		Business name
doing bus	siness as names	Business name		Business name
		EIN		EIN
1935-1964 (historia de sociones de sociones por grando de sociones		EIN		EIN — — — — —
. Where y	ou live	manakan menenya terteka dibebihar da selesi dan dan dibebihar da beranda pelangan pelangan dibebihar da selesi	en e	### Debtor 2 lives at a different address:
		18941 Baker Ave		
		Number Street		Number Street
		Country Club Hills	IL 60478	
		Cook	State ZIP Code	City State ZIP Code
		County If your mailing address is dif above, fill it in here. Note tha any notices to you at this mailing	t the court will cond	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		same Number Street		Number Street
		P.O. Box		P.O. Box
A \$ 46\$ \$\delta \chi \chi \chi \chi \chi \chi \chi \chi	4 Shirmon A Registration for the control of the con	City	State ZIP Code	City State ZIP Code
Why you a	re choosing	Check one:		Check one:
bankruptc		Over the last 180 days before I have lived in this district lost other district.	nger than in any	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		(See 28 U.S.C. § 1408.)	ain.	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
				:

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 3 of 70

	Dertson ^{e Name}	Lasi Nan	Cas	se number (#known)
Part 21 Tell the Court At	bout You	r Bankru	tcy Case	
7. The chapter of the Bankruptcy Code you	Chec for B	k one. (For ankruptcy (a brief description of each, see <i>Notice Req</i> orm 2010)). Also, go to the top of page 1 a	uired by 11 U.S.C. § 342(b) for Individuals Filing
are choosing to file under	Ø	hapter 7		and officer the appropriate box.
	Ос	hapter 11		
	Ос	hapter 12		
and the second consists an experimental annual to the second consists of the second consist	Q c	napter 13		
8. How you will pay the fee	Iod yo su wir Z I n Ap D I re By les pay	urself, you bmitting you had pre-posed to particular the law, a jud s than 150 the fee in	may pay with cash, cashier's check, our payment on your behalf, your attornated address. The fee in installments. If you choose a language in the fee in installments in the fee in installments in the fee in installments. If you choose a language in installments in the fee in installments.	ney money order. If your attorney is ney may pay with a credit card or check se this option, sign and attach the <i>Installments</i> (Official Form 103A). It this option only if you are filing for Chapter to your family size and you are unable to
Have you filed for bankruptcy within the last 8 years?	⊿ No		When	
		District		
			When MM / DE	Case number
		District	WhenMM / DD	Case number
		** ***	WING / DD	7, 7777
Are any bankruptcy	No No			
cases pending or being filed by a spouse who is	Tyes.	Debtor		Relationship to you
not filing this case with you, or by a business		District	When	Case number, if known
partner, or by an affiliate?			MM / DD	/ YYYY
		Debtor		Relationship to you
		District		Case number if known
			MM/DD/	1111
Do you rent your residence?		Go to line		
		No. Go	o line 12.	

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 4 of 70

Debtor 1 Simone Rob First Name Middle I		Lasi Name		Cas	e number (if know	vn}
Paris: Report About Am						
REPORT ABOUT Any	Busine	esses You Own as a	Sole Pro	prietor		
2. Are you a sole proprieto of any full- or part-time		o. Go to Part 4.				
business?	☐ Ye	es. Name and location of	f business			
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if ar	y			
LLC,		Number Street				
If you have more than one sole proprietorship, use a separate sheet and attach it		444				
to this petition.		City				
		·			State	ZIP Code
		Check the appropriat	e box to des	cribe your business	:	
		Health Care Busi	ness (as def	ined in 11 U.S.C. §	101(27A))	
		Single Asset Rea	Estate (as	defined in 11 U.S.C	. § 101(51B))	
		Stockbroker (as d	efined in 11	U.S.C. § 101(53A))		
		☐ Commodity Broke	r (as defined	l in 11 U.S.C. § 101	(6))	
		None of the above			. ,,	
are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	No.	I am not filing under Clarification	napter 11.	and procedure if [1 0.3,0. 9 11	debtor, you must attach your nd federal income tax return or if 16(1)(B). according to the definition in
······································						
	₩ Yes.	I am filing under Chapt Bankruptcy Code.	er 11 and I a	ım a small business	debtor accor	rding to the definition in the
rt 4: Report if You Own o	r Have /	Any Hazardous Pro	perty or A	ny Property Tha	t Needs Im	mediate Attention
Do you own or have any property that poses or is	No No					
alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is the hazard?				
Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock		If immediate attention	s needed, w	hy is it needed?		
hat must be fed, or a building hat needs urgent repairs?						
		Where is the property?	Number	Street		
				Oudel		
			R	······································		
			O2-			
			City			State ZIP Code

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 5 of 70

Debtor 1

Simone Robertson

Case number (if known)_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to rec	eive a	briefina	about
cred	it co	ounselina	beca	ISA OF		

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by abone are

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone as

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

Page 6 of 70 Document Simone Robertson Debtor 1 Case number (if known) Answer These Questions for Reporting Purposes Part 6: 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." vou have? No. Go to line 16b. Yes, Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and ☑ No. administrative expenses Yes are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do **1**-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? **1**00-199 10.001-25,000 ☐ More than 100,000 200-999 19. How much do you \$0-\$50,000 ☐ \$1,000,001-\$10 million \$500.000.001-\$1 billion estimate your assets to \$50,001-\$100,000 ■ \$10,000,001-\$50 million □ \$1.000,000,001-\$10 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion □ \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion

Part 7:

to be?

Sign Below

estimate your liabilities

\$0-\$50,000

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

20. How much do you

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and

\$1,000,001-\$10 million

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

* Simere Robertæn	★ _{N/A}
Signature of Debtor 1	Signature of Debtor 2
500 M2 02 2016	

Executed on MM / DD / YYYY MM / DD / YYYY

☐ \$500,000,001-\$1 billion

More than \$50 billion

□ \$1,000,000,001-\$10 billion

☐ \$10,000,000,001-\$50 billion

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 7 of 70

Debtor 1

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

and any and any and app	ıy.
Are you aware that filing for bankruptcy is a seriou consequences? No Yes	is action with long-term financial and legal
Are you aware that bankruptcy fraud is a serious c inaccurate or incomplete, you could be fined or imple No Yes	rime and that if your bankruptcy forms are prisoned?
Yes. Name of Person	n attorney to help you fill out your bankruptcy forms? Declaration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the have read and understood this notice, and I am awattorney may cause me to lose my rights or propert	are that filing a hankruptcy case without on
Signature of Debtor 1	Signature of Debtor 2
Date <u>02032016</u> MM/DD /YYYY	Date MM / DD / YYYY
Contact phone (708) 937-4195	Contact phone
Cell phone (708) 937-4195	Cell phone
Email address srobertson4@yahoo.com	Email address

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 8 of 70

Fill in this in	iformation to ide	entify your case:		
Debtor 1	Simone Robe	rtson		
	First Name	Middle Name	Last Name	
Debtor 2	N/A			
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	r the: Northern District of III	inois	¥
Case number				
	(If known)		·	

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 18 Summarize Your Assets

	Your assets Value of what you own	
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		
1b. Copy line 62, Total personal property, from Schedule A/B	\$! =
1c. Copy line 63, Total of all property on Schedule A/B	s7,652.00	

Rart 2: Summarize Your Liabilities

			iabilities It you owe	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	11,998.00	
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	65,528.00	
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	29,229.00	
	Your total liabilities	\$	106,755.00	

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I	\$ 2,572.56
Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$ 2,755.00

Entered 02/03/16 11:19:53 Desc Main Case 16-03207 Filed 02/03/16 Doc 1 Page 9 of 70

Debtor 1

Simone Robertson

Document

Middle Name

Last Name

Case number (# known)_

	Answer These Questions for Administrative and Statistical Records							
6	Are you filing for bankruptcy under Chapters 7, 11, or 13?							
	☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your ☐ Yes	other schedules.						
7.	What kind of debt do you have?	ka talah mengangan di kebuah di dibanah mengah terbahan berahan pengangan pengangan pengangan berahan sebagai Sebagai pengangan pe						
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this b this form to the court with your other schedules.							
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	s <u>1,983.00</u>						
to while the								

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

In the Control of the	1.1	claim
From Part 4 on Schedule E/F, copy the following:	\ \	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	65,528.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$	65,528.00

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Sin	none Robertson					
	Name NobellSOII	Middle Name	Last Name	AAAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAA AA MARAAA AA MARAA AA MARAA AA MARAAA AA MARAAA AA MARAAA AA MARAAA AAA		
Debtor 2 N/ Spouse, if filing) First						
		Middle Name	Last Name			
Inited States Bankı	ruptcy Court for the: No	orthern District of	of Illinois			
ase number						
·····						☐ Check if this is a
) #6:	4001/5			17.5.191		amended filing
	rm 106A/B					
Schedu	ile A/B: P	oper'	tv			
The second secon				once. If an asset fits in more		12/15
				al Estate You Own or Hav		
No. Go to P	art 2.				està i	
Yes. Where	is the property?					
				ty? Check all that apply.	Do not doduct convert	Nilosofielija (nilosofie) s
1.1、			Single-family hom		the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D</i> .
Street add	ress, if available, or othe	er description	 Duplex or multi-ur Condominium or c 			ims Secured by Property.
			Manufactured or n		Current value of the entire property?	Current value of th
•	And the second s		- 🔲 Land		\$	portion you own?
			Investment proper Timeshare	rty		Ψ
City	Stat	te ZIP Code	Timeshare Other		Describe the nature interest (such as fee	simple, tenancy by
				t in the property? Check one.	the entireties, or a lif	e estate), if known.
			Debtor 1 only	the the property? Check one.		
County			Debtor 2 only			
County			Debtor 1 and Debto	or 2 only	☐ Check if this is co	mmunity property
County			At least one of the	debtors and another	(see instructions)	
County						
ŕ			Other information vo	ou wish to add about this ite on number:	m, such as local	
ŕ	e more than one, list	t here:	Other information vo	ou wish to add about this ite on number:	m, such as local	
ŕ	'e more than one, list	t here:	Other information you property identification What is the property?	Check all that apply		ment strokere
f you own or hav			Other information your property identification. What is the property? Single-family home	on number:	Do not deduct secured cla the amount of any securer	ims or exemptions. Put
f you own or hav	re more than one, list		Other information your property identification What is the property? Single-family home Duplex or multi-unit the	Check all that apply.	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
f you own or hav			Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo	Check all that apply. building perative	Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the	ims or exemptions. Put I claims on Schedule D: as Secured by Property. Current value of the
f you own or hav			What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot	Check all that apply. building perative	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	ims or exemptions. Put diclaims on Schedule Dins Secured by Property.
f you own or hav			Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot Land Investment property	Check all that apply. building perative bile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property? \$	ims or exemptions. Put I claims on Schedule D: as Secured by Property. Current value of the portion you own?
f you own or hav		r description	Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot Land Investment property Timeshare Other Other	Check all that apply. building perative bile home	Do not deduct secured cla the amount of any securet Creditors Who Have Clain Current value of the entire property? \$ Describe the nature of interest (such as fee s	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
f you own or hav	ess, if available, or other	r description	Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot Land Investment property Timeshare Other Who has an interest in	Check all that apply. building pperative bile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property? Describe the nature of	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
f you own or hav 1.2. Street addre	ess, if available, or other	r description	Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot Land Investment property Timeshare Other Who has an interest in Debtor 1 only	Check all that apply. building perative bile home	Do not deduct secured cla the amount of any securet Creditors Who Have Clain Current value of the entire property? \$ Describe the nature of interest (such as fee s	ims or exemptions. Put of claims on Schedule D. on Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
f you own or hav	ess, if available, or other	r description	Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot Land Investment property Timeshare Other Who has an interest in Debtor 1 only Debtor 2 only	Check all that apply. building operative bile home	Do not deduct secured cla the amount of any securer Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee s the entireties, or a life	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by estate), if known.
f you own or hav 1.2. Street addre	ess, if available, or other	r description	Other information your property identification What is the property? Single-family home Duplex or multi-unit to Condominium or coo Manufactured or mot Land Investment property Timeshare Other Who has an interest in Debtor 1 only	Check all that apply. building operative bile home the property? Check one.	Do not deduct secured cla the amount of any securet Creditors Who Have Clain Current value of the entire property? \$ Describe the nature of interest (such as fee s	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by estate), if known.

Debtor 1	First Name M				
1.3.	Street address, if availa	able, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Creditors Who Have C	claims or exemptions. Put ured claims on Schedule D laims Secured by Property e Current value of the portion you own?
			Land	\$	\$
	City	State ZIP Code	Investment property Timeshare Other	interest (such as fe	of your ownership e simple, tenancy by
				the entireties, or a l	ife estate), if known.
			Who has an interest in the property? Check one		
	County		Debtor 1 only		
			Debtor 2 only	F-10-14	
			Debtor 1 and Debtor 2 only		ommunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this in property identification number:	tem, such as local	
Add th	ne dollar value of the	portion you own for	of your entries from Port 4 including	_	
you h	ave attached for Pari	t 1. Write that number	here.		\$0.0
you o	Describe Your	gal or equitable intere	st in any vehicles, whether they are registered a		
	wn, lease, or have leg nat someone else drive vans, trucks, tractors	gal or equitable intere	st in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts	not? Include any vehicle and Unexpired Leases.	S
you ov own the Cars, v	wn, lease, or have legnat someone else driverans, trucks, tractors	gal or equitable intere es. If you lease a vehic s, sport utility vehicles	e, also report it on Schedule G: Executory Contracts , motorcycles	and Unexpired Leases.	
you ov own the Cars, v No	wn, lease, or have leg nat someone else drive vans, trucks, tractors	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota	, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured da	····it dags.ibdags.com
you ov own the Cars, v No V Yes	wn, lease, or have legnat someone else driverans, trucks, tractors	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE	who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any secure.	ims or exemptions, Put
you over the country own the c	wn, lease, or have leg nat someone else drive vans, trucks, tractors	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
you ov own the Cars, v No Yes 3.1.	wn, lease, or have leg nat someone else drive vans, trucks, tractors s Make: Model:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured da the amount of any secured Creditors Who Have Clain Current value of the	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the
you ov own the Cars, v I No I Yes 3.1. M	wn, lease, or have legenat someone else driverans, trucks, tractors Make: Model: Approximate mileage:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
you ov own the Cars, v I No I Yes 3.1. M	wn, lease, or have leg nat someone else drive vans, trucks, tractors s Make: Model:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured da the amount of any secured Creditors Who Have Claim Current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
you over the country of the country	wn, lease, or have legenat someone else driverans, trucks, tractors Make: Model: Approximate mileage:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured da the amount of any secured Creditors Who Have Clain Current value of the	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the
you over own the country of the coun	wn, lease, or have legenat someone else driverans, trucks, tractors Make: Model: Approximate mileage:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005 108804	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured da the amount of any secured Creditors Who Have Claim Current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
you ov own the Cars, v No 2 Yes 3.1. M	wn, lease, or have legant someone else driverans, trucks, tractors Make: Model: Vear: Approximate mileage: Other information:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005 108804	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 5,943.00	ims or exemptions. Put of claims on Schedule Diss Secured by Property. Current value of the portion you own? \$ 5,943.00
you own the Cars, No Yes 3.1. If A Community you ow see 2.2. M	wn, lease, or have legat someone else driver ans, trucks, tractors where the more than ake:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005 108804	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 5,943.00	ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ 5,943.00
you over the control own the c	wn, lease, or have legant someone else driverans, trucks, tractors Make: Model: Approximate mileage: Other information: wn or have more than ake: odel:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005 108804	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 5,943.00 Do not deduct secured claim the amount of any secured claim the amount of any secured.	ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ 5,943.00
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you ov own the Cars, vo. 22. M. M. Yes	wn, lease, or have legant someone else driverans, trucks, tractors Make: Model: Approximate mileage: Other information: wn or have more than ake: odel:	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005 108804	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 5,943.00 Do not deduct secured claim the amount of any secured Creditors Who Have Claim. Current value of the	ims or exemptions. Put of claims on Schedule Dissecured by Property. Current value of the portion you own? \$ 5,943.00 ms or exemptions. Put claims on Schedule Dissecured by Property. Current value of the
you own the Cars, which is a second of the cars, which is a se	wn, lease, or have legat someone else driver vans, trucks, tractors which was a second of the control of the co	gal or equitable intere es. If you lease a vehic s, sport utility vehicles Toyota Sienna XLE 2005 108804	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 5,943.00 Do not deduct secured claim the amount of any secured Creditors Who Have Claim. Current value of the	ims or exemptions. Put delaims on Schedule Dissecured by Property. Current value of the portion you own? \$ 5,943.00 ms or exemptions. Put claims on Schedule Dissecured by Property.

	First Name Middle Name	Last Name Document Page 12 of 749e number		
			t the commence of	
3.3.	Make:	Who has an interest in the property? Check one	Market and the second	al ve view valuates es al al
	Model:	Dahtan 4 and	Do not deduct secured the amount of any secure	claims or exemptions. Pu
	Year:	Debtor 2 only	Creditors Who Have Cla	aims Secured by Propert
		Debtor 1 and Debtor 2 only	Current value of the	Current value of
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own
	Other information:			
		☐ Check if this is community property (see	\$	\$
		instructions)		
.4.	Make:	Who has an interest in the manual of a	_ managan a agam aya,	
	Model:	Who has an interest in the property? Check one.	Do not deduct secured c	aims or exemptions Pu
		Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clai	ed claims on Schedule L
	Year:	Debtor 2 only Debtor 1 and Debtor 2 only		and the second second second second
	Approximate mileage:	At least one of the date	Current value of the entire property?	Current value of portion you own?
	Other information:	At least one of the debtors and another	The property :	portion you own
		☐ Check if this is community property (see	\$	¢.
		instructions)	Ψ	\$
No	oo. bodts, trailers, motors, personal	and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor	s sories vies	
No	oo. bodts, trailers, motors, personal	and other recreational vehicles, other vehicles, and acces watercraft, fishing vessels, snowmobiles, motorcycle accesso	s sories vies	
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No Yes	fake:	watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured	ims or exemptions. Put
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No Yes . M . V	fake:fodel:	watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D. Is Secured by Property.
No Yes . M . V	fake:	watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D. Is Secured by Property. Current value of the
No Yes . M . V	fake:fodel:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D: s Secured by Property.
No Yes N	fake:fodel:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put claims on Schedule D is Secured by Property. Current value of the
No Yes M	fake:fodel:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D. Is Secured by Property. Current value of the
No Yes M W Y	flake: flodel: floder:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put claims on Schedule D is Secured by Property. Current value of the
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No Yes No Yes No Model of the control of the cont	flake: flodel: flodel: floder: floer: floe	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claims	ims or exemptions. Put claims on Schedule D. is Secured by Property. Current value of the portion you own? \$
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No Yes	flake: flodel: flodel: floder: floer: floe	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claims Current value of the	ims or exemptions. Put claims on Schedule D: is Secured by Property. Current value of the portion you own? \$

4.

Simone Robertson

Document

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 13 of 70
Case number (# known)

Last Name

Pant 3; Descrit	e Your	Personal	and	Household	Items

U	ບ you own or have any leg	al or equitable interest in any of the following items?		I own?
6.	Household goods and ful		or exemption:	s. (4)505049
	Examples: Major appliance	es, furniture, linens, china, kitchenware		
	U No			
	Yes. Described	inette/ Progressive twin beds, dressers/GAFCO microwave/lamps/dishes		
		acuum, food/ living room sectional lawn mower, iron, all items at used value	\$	650.00
7.	Liethonics		. i	
	Examples: Televisions and	radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music		
	□ No	tronic devices including cell phones, cameras, media players, games		
	Yes, Describe	's/ dvd playar/ home dealth	h q	
		's/ dvd player/ home desktop computer/ Aarons at used store value	\$	450.00
8,	Collectibles of value			
	Examples: Antiques and figure	urines; paintings, prints, or other artwork; books, pictures, or other art objects;		
		aseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe SC	hool books/ bible family pictures(no cash value) at used book store value		110.00
0	L		\$	110.00
Э.	Equipment for sports and I	hobbies		
	and kayaks; carp	phic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes entry tools; musical instruments		
	□ No			
		ard games valued at yard sale prices		
			\$	50.00
10,	irearms			
	Examples: Pistols, rifles, sho	tguns, ammunition, and related equipment		
- 1	No			
	Yes. Describe		•	
11.0	Clothes		\$	
[No	furs, leather coats, designer wear, shoes, accessories		
		mal wearing apparel at used store prices		
		apparor at asea store prices	\$	297.00
. .				
	eweiry			
<u> </u>	xamples: Everyday jewelry, a gold silver	costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	1 No			
	Vac Deceribe			
	wat	ch at pawn shop value	\$	35.00
	on-farm animals			
	xamples: Dogs, cats, birds, h	norses		
	No			
L.	Yes. Describe			
	<u></u>		S	****
. Ar	ly other personal and hous	sehold items you did not already list, including any health aids you did not list		
4	No			
	Yes. Give specific			
	information	\$		
. Ac	ld the dollar value of all of	your entries from Part 3, including any entries for pages you have attached		
fo	Part 3. Write that number	here		1,592.00
			· · · · · · · · · · · · · · · · · · ·	

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1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 14 of Poe number (# known)

Part 4:

Describe Your Financial Assets

- you own or nave a	ny legal or equitable interest i	n any of the following?	Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash	no barra ta como a no como a como		SACINDIONS: CONTRACTOR
□ No	ou nave in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petition	
		Cash [,]	
		Cash:	\$
17. Deposits of money Examples: Checking and other No	, savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each.	
Yes		Institution name:	
	17.1. Checking account:	Chase Bank checking account #0345	\$ 27.00
	17.2. Checking account:	US Bank checking account #4389	\$ 15.00
	17.3. Savings account:		•
	17.4. Savings account:		3
	17.5. Certificates of deposit:		P
	17.6. Other financial account:		5
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		\$
			\$
Bonds, mutual funds, Examples: Bond funds, Van No	Institution or issuer name:	erage firms, money market accounts	
			\$
			\$
			Ψ
Non-publicly traded st	tock and interests in incorpora	ated and unincorporated businesses, including an interest in	
an LLC, partnership, a	,		
✓ No ✓ Yes. Give specific information about	Name of entity:	% of ownership:	\$
☑ No ☐ Yes. Give specific		Λ%.	\$ \$

		Document Pa		
20. Government and	orporate bonds and other	negotiable and non-negoti	able instruments	
iveuoliable instrum	ents include personal checks, ruments are those you canno	man and the state of the state		
☑ No				
Yes. Give speci information about them	t			
weith				
				\$
21. Retirement or pens	ion accounts	1 400(1) (1 15		
☑ No	1107, ENISA, Neogii, 401(K), 403(b), thrift savings acco	unts, or other pension or profit-sha	aring plans
Yes. List each				
	ly. Type of account: Ins	titution name:		
	401(k) or similar plan:			\$
	Pension plan:			
	IRA:			
	Retirement account:			
	Keogh:			
	Additional account:			
	Additional			
	Additional account:			
	Additional account:			\$
22. Security deposits an	d prepayments			\$
Your share of all unus	d prepayments	O that you may and in.		\$
Your share of all unus Examples: Agreemen	d prepayments	O that you may and in.		\$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent	o that you may continue ser , public utilities (electric, gas		\$
Your share of all unus Examples: Agreemen companies, or others	d prepayments ed deposits you have made s s with landlords, prepaid rent	O that you may and in.		\$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric:	o that you may continue ser , public utilities (electric, gas n name or individual:	vice or use from a company , water), telecommunications	
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas:	o that you may continue ser , public utilities (electric, gas n name or individual:		\$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil:	o that you may continue ser, public utilities (electric, gas	vice or use from a company , water), telecommunications	\$\$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil: Security deposit on rental unit	o that you may continue ser, public utilities (electric, gas	vice or use from a company , water), telecommunications	\$\$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil: Security deposit on rental unit	o that you may continue ser, public utilities (electric, gas	vice or use from a company , water), telecommunications	\$\$ \$ \$ \$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil: Security deposit on rental unit	o that you may continue ser public utilities (electric, gas n name or individual:	vice or use from a company , water), telecommunications	\$\$\$\$\$\$\$\$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil: Security deposit on rental unit Prepaid rent: Telephone: Water:	o that you may continue ser, public utilities (electric, gas	vice or use from a company , water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil: Security deposit on rental unit Prepaid rent: Telephone: Water:	o that you may continue ser, public utilities (electric, gas	vice or use from a company , water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$
Your share of all unus Examples: Agreemen companies, or others No	d prepayments ed deposits you have made s s with landlords, prepaid rent Institution Electric: Gas: Heating oil: Security deposit on rental unit Prepaid rent: Telephone: Water: Rented fumiture:	o that you may continue ser, public utilities (electric, gas	vice or use from a company , water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$
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24. Interests in an education IRA, in an	account in a qualified ABLE program, or under a qual	ified state tuition	
- (-)(-); ((-); Gild (529(b)(1).	med state taltion progra	ım.
☑ No			
YesInstitut	ion name and description. Separately file the records of a	av interacte 11 II C. c.c.	24(-)
			21(c):
			\$
			\$
			\$
25. Trusts, equitable or future interests i exercisable for your benefit	in property (other than anything listed in line 1), and ri	ghts or powers	
☑ No			
Yes. Give specific			
information about them			
·			\$
26. Patents, copyrights, trademarks, trac	le secrets, and other intellectual property		
Examples, internet domain names, web	sites, proceeds from royalties and licensing agreements		
No No			
Yes. Give specific information about them		maa magaan iyo ibka aa qoongaada ka maa yo aadaba aa agaalah aa agaalah ka aa gaa ah biraa agaalah	to # = compart of
			\$
7. Licenses, franchises, and other generation	ral intangibles		
☑ No	censes, cooperative association holdings, liquor licenses,	professional licenses	
Yes, Give specific			
Yes. Give specific information about them			
information about them			\$
information about them		WANDAN ARK	Angligh na ipag na an an an an an
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information about them			Current value of the portion you own? Do not deduct secured
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Debtor 1	First Name Middle Name	oc 1 Filed 02/03/16 Last Name Document	Entered 02/03/16 11:19:53 D Page 17 of number (f known)	Desc Main
31 Interest	ts in insurance policies			
Example	es: Health, disability, or life insura	ince: health cavings account (Lic	A); credit, homeowner's, or renter's insurance	
No No	The state of the state of	moe, health savings account (HS)	4); credit, nomeowner's, or renter's insurance	
	. Name the insurance company			
- 703.	of each policy and list its value.	Company name:	Beneficiary:	Surrender or refund value
				<u> </u>
				\$
Δny inte	proof in proposity that is, it.			\$
If you are	erest in property that is due you e the beneficiary of a living trust, because someone has died.	a from someone who has died expect proceeds from a life insura	ance policy, or are currently entitled to receive	
No No				
TYes.	Give specific information			
				\$
Claima -	and the state of t			•
~valuble	igainst third parties, whether o s: Accidents, employment dispute	r not you have filed a lawsuit or es, insurance claims, or rights to s	r made a demand for payment sue	
☑ No	5	2 miles and the state of the st		
□ Yes.	Describe each claim			
	ntingent and unliquidated clair f claims	ns of every nature, including co	ounterclaims of the debtor and rights	\$
No No				
Yes. I	Describe each claim		Proposition to the state of the	WY, W from a sp
				\$
Any finan	icial assets you did not already	liet		
☑ No				
	Give specific information	and the second s		····· company
00. \	orre specific information	and the second control of the second of the		\$
Add the d	dollar value of all of your entrie		ries for pages you have attached	
for Part 4	. Write that number here	g any em	Ties for pages you nave attached	117.00
				3
nt 5:	Describe Any Business.F	laisted Property Vey On		
			n or Have an Interest In. List any i	real estate in Part 1.
Do you ov	vn or have any legal or equitab	le interest in any business-rela	ted property?	
No. Go				
☐ Yes. G	So to line 38.			
				Current value of the
				portion you own?
				Do not deduct secured claims
Accounts	receivable or commissions you	i alroadu opra		or exemptions.
No No		-		
	escribe			••••
1 CO. D				\$
Office equ	ipment, furnishings, and suppl	ies	The state of the s	
xamples: B	usiness-related computers, software,	modems, printers, copiers, fax machin	es, rugs, telephones, desks, chairs, electronic devices	
⊈ No			, and the state of	
🔲 Yes. De	escribe			7

Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe		Middle Name Last Name Document Page 18 of Pop number (if knot		
Inventory No Yes. Describe	0. Machinery, fixtures,	equipment, supplies you use in business, and tools of your trade		
Inventory No Yes, Describe Interests in partnerships or joint ventures No Yes, Describe Name of entity: No S Customer lists, mailing lists, or other compilations No Yes, Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes, Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes, Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes, Describe S No Yes, Give specific Information S No S No S S S S S S S S S S S S S S S				
Inversory No Yes. Describe	Yes. Describe			
Inventory No Yes, Describe Name of entity: **Software flists, mailing lists, or other compilations No Yes, Describe No Yes, Describe No Yes, Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes, Describe No Yes, Describe No Yes, Close specific Information No Soft on Part 5. Write that number here No O you own or have an interest in formland, list it in Part 1. O you own or have any legal or equitable interest in any farm- or commercial fishing-related property? I yes, Go to Part 7. Yes, Go to Ine 47. Current value of the portion you own or deducts secured clarge or excemptions. Yes		Best of the first financial and the first of		\$
No Yes Describe S S S S S S S S S		The state of the s	to de trada com como como proper contra de compara como que pro-	r ann mòrain ann a _{r air} g
Ves. Describe S				
Interests in partnerships or joint ventures No Yes. Describe Name of entity: No Yes. Do your lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe No Yes. Describe S Any business-related property you did not already list No Yes. Give specific Information S S S S S S S And the dollar value of all of your entries from Part 5, including any entries for pages you have attached or Part 5. Write that number here S S S S S S S S S S S S S S S S S S				H HILAGO . K HILIMINE I V
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Name of entity: Yes. Describe Name of entity: % of ownership: % % % % % % % % %	Interests in partners			
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Any business-related property you did not already list No Yes. Give specific information				s
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Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. O you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. No No No No No No No No No N				\$
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Current value of the portion you own? Do not deduct secured claims or exemptions. I No Yes	If you own or	have an interest in farmland, list it in Part 1.	o interest	ın.
Ves. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Current value of the portion you own? Do not deduct secured claims or exemptions.				
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xamples: Livestock, poultry, farm-raised fish No Yes				Current value of the portion you own?
l Yes	ırm animals			
l Yes	xamples: Livestock, po	ultry, farm-raised fish		
l Yes	No			
	Yes			
				dr.

Debtor 1	First Name Middle Name		02/03/16 ument		2/03/16 11:19:53 CASS: number (if known)		ain
48. Crops	either growing or harveste	ed					
☑ No					n sie tie bekan in konstitue het de kan konstitue de gewaren en sommende en kan konstitue de gewaren.		
Yes.	Give specific			7° - 4° - 10	er men en en fart fan menne fan fan en mines gen aftern en menningen it en en men genare after a fan	ark one warmen of a commence of a company of the co	
	} 	, A,	tiga talah sa talah sa mana da mana da sa		t species and the property assessed for the first section of the s		····
∠ No	d fishing equipment, imple						
- 103						**************************************	
50. Farm and	fishing supplies, chemic	ale and food				\$	
No No							
Yes	y 100 m/m 15 mm 100 mm				The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	***************************************	anna pro anto a regional (14 anto antonio antonio antonio antonio antonio antonio antonio antonio antonio anto		·		\$	
51. Any farm	- and commercial fishing-						
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	ation					\$	
52. Add the c	ioliar value of all of your e	entries from Part 6 inc	ludina anu	4!	_	¢	0.00
	. Write that number here	***************************************		***************************************	•••••••••••••••••••••••••••••••	→	
Part 7:	Describe All Property	V Voit Our or Ha.					
				est in that	TOU DIG NOT LIST A	bove	
53. Do you ha	ave other property of any l Season tickets, country club mer	dind you did not alread	dy list?				
☑ No		miner 9111h		of constraints of the of Francisco water of the Special Constraints of the			
Yes. G	ive specific					\$	
						\$	
					A PROPERTY OF THE PROPERTY OF	\$	WIII
54. Add the do	ollar value of all of your en	tries from Part 7. Writ	e that number	here		→ \$	0.00
						<u> </u>	
Part 8:	ist the Totals of Eac	h Part of this For	m				
55. Part 1: Tota	al real estate, line 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*******************************			→ s	0.00
	al vehicles, line 5		\$	5,943.00		· · · · · · · · · · · · · · · · · · · 	
57. Part 3: Tota	al personal and household	items, line 15	\$	1,592.00			
58. Part 4: Tota	Il financial assets, line 36		\$	117.00			
59. Part 5: Tota	l business-related propert	ty, line 45	\$	0.00			
60. Part 6: Tota	l farm- and fishing-related	property, line 52	\$	0.00			
1. Part 7: Tota	l other property not listed	, lìne 54	+\$	0.00			
2. Total persor	nal property. Add lines 56 t	hrough 61	. \$	7,652.00 _{Cc}	opy personal property tota	al → +e	7,652.00
				2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. 7 F Time property total	- TD	-,
3. Total of all p	property on Schedule A/B.	Add line 55 + line 62	•••••			•	7,652.00
						[*	

Fill in this infor	SEASTEANISEUSE AND MUSIC AND SEASTEAN AND AND AND AND AND AND AND AND AND A	_		
	mation to identify your case:	Dogweet	Page 20 of 70	
Debtor 1 Sir	mone Robertson			
A.F	t Name Middle Nam /A	e Last Name		
Debtor 2 IN (Spouse, if filing) Firs		e Last Name		
United States Bank	cruptcy Court for the: Northern Dis	trict of Illinois	▼	
Case number				—
(if known)				Check if this is amended filing
Official For	m 106C			
chedu	le C: The Pro	perty You	Claim as Exemp) t 12/15
as complete an	d accurate as possible. If two n	narried people are filing to	reather both are equally reconstitutes	
ace is needed, fi	Journal of Deligating AVD. FI	ODERV COmicial Form 106	Additional Page as necessary. On the to	
	o namber (ii knowit).			
r each item of p	roperty you claim as exempt	, you must specify the	amount of the exemption you claim. (One way of doing so is to state a
	and an exempt viterialistististististististististististististi	/. YOU IIIAY CIAIM THA TIII	l tair market value of the meanant, t -:	
irement funds	-may be unlimited in dollar a	mount. However if you	r health aids, rights to receive certain claim an exemption of 100% of fair m	benefits, and tax-exempt
	and a barricalar applier attion	in and the value of the	property is determined to exceed that	larket value under a law that
uld be limited to	o the applicable statutory am	ount.		simount, your exemption
art 18 Ident	ifu the Dunnatu V			
14011	ify the Property You Clair	m as Exempt		
Which set of e	xemptions are you claiming	? Check one only, even if	VOUR SPAUSO in filing with	
Which set of e	xemptions are you claiming?	? Check one only, even if	your spouse is filing with you.	
You are cla	timing state and federal nonbar	nkruptcy exemptions, 11	your spouse is filing with you. U.S.C. § 522(b)(3)	
You are cla	xemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11	nkruptcy exemptions, 11	your spouse is filing with you. U.S.C. § 522(b)(3)	
You are cla	aiming state and federal nonbar aiming federal exemptions. 11	nkruptcy exemptions. 11 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
You are cla	niming state and federal nonbar niming federal exemptions. 11 in try you list on Schedule A/B	nkruptcy exemptions. 11 U.S.C. § 522(b)(2) that you claim as exemp	your spouse is filing with you. U.S.C. § 522(b)(3) ot, fill in the information below.	
You are cla You are cla For any proper	niming state and federal nonbar niming federal exemptions. 11 in try you list on Schedule A/B	nkruptcy exemptions. 11 U.S.C. § 522(b)(2) that you claim as exemptions. 11 Current value of the	U.S.C. § 522(b)(3)	Specific laws that allow exemption
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For any proper Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claimir (Subject to adjust No	aiming state and federal nonbar aiming federal exemptions. 11 Introduction of the property and line on that lists this property 2005 Toyota Sienna 3.1 household goods 6 electronics 7 ing a homestead exemption of stment on 4/01/16 and every 3	current value of the portion you own Copy the value from Schedule A/B \$5,943.00 \$450.00 f more than \$155,675? years after that for cases	U.S.C. § 522(b)(3) ot, fill in the information below. Amount of the exemption you claim Check only one box for each exemption. ✓ \$ 2,400.00 ☐ 100% of fair market value, up to any applicable statutory limit ☐ \$ 650.00 ☑ 100% of fair market value, up to any applicable statutory limit ☐ \$ 450.00 ☑ 100% of fair market value, up to any applicable statutory limit ☐ \$ 450.00 ☑ 100% of fair market value, up to any applicable statutory limit	735-5/12-1001(b) 735-5/12-1001(b) 735-5/12-1001(b)
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Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

Last Name Document Page 21 of 🕫 number (if known)_______

Part 2: Additional Page

on Schedule	tion of the property and line A/B that lists this property	portion	t value of the you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy th Schedu	ne value from rle A/B	Check only one box for each exemption	n
Brief description:	school books/bible	. \$	110.00	2 🔲 \$ 100.00	725 5/42 4004(1)
Line from Schedule A/B:	8			100% of fair market value, up to any applicable statutory limit	735-5/12-1001(b)
Brief description:	hobby/board games	\$	50.00		735-5/12-1001(b)
Line from Schedule A/B;	9			100% of fair market value, up to any applicable statutory limit	7-33-3/12-1001(0)
Brief description:	clothes	\$	297.00	□ \$ 297.00	705 8445 44-44
Line from Schedule A/B:	11		******	100% of fair market value, up to any applicable statutory limit	735-5/12-1001(a)
Brief description:	jewelry/watch	\$	35.00	3 5.00	735-5/12-1001(b)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	733-3/12-1001(b)
Brief description:	cash in wallet	\$	75.00	5 \$ 75.00	735-5/12-1001(b)
Line from Schedule A/B:	16			100% of fair market value, up to any applicable statutory limit	
Brief description:	Chase Bank	\$	27.00	☐ \$ 27.00	725 5/42 4004/h)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	735-5/12-1001(b)
Brief description:	US Bank	\$	15.00	□ _{\$} 15.00	725 5/42 4004/53
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	735-5/12-1001(b)
acacription,	expected 2015 tax	\$		- \$	735-5/12-1001(g)(1)
Line from Schedule A/B: -	28			100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$			
ine from Schedule A/B:	·			100% of fair market value, up to any applicable statutory limit	
Brief lescription: -		\$		□ \$	
ine from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief escription: -		\$	1000	Q \$	
ine from Schedule A/B:	A MANAGEMENT			☐ 100% of fair market value, up to any applicable statutory limit	
rief escription: –		\$		□ \$	
ne from chedule A/B:	_			100% of fair market value, up to any applicable statutory limit	

Entered 02/03/16 11:19:53 Desc Main Page 22 of 70 Case 16-03207 Doc 1 Filed 02/03/16

The state of the s	Document	Page 22 of 70			
Fill in this information to identify your c	ease:				
Debtor 1 Simone Robertson					
First Name Midd	dle Name Last Name				
(Spouse if filing) Figure	de Name Last Name				
United States Bankruptcy Court for the: Norther					
Case number	TO DISTRICT OF MILIONS				
(If known)	MANAGEMENT AND THE STREET AND THE ST				
					if this is an ded filing
Official Form 106D					,g
Schedule D: Creditor	rs Who Have C	aime See			
ue do comblete and accurate se necella-	LE 4				12/15
Be as complete and accurate as possible information. If more space is needed, coladditional pages, write your name and ca	. If two married people are fill py the Additional Page, fill it c	ing together, both are e	qually responsible	for supplying correc	ct
additional pages, write your name and ca	ase number (if known).	The state of the s	and attach it to this	s form. On the top o	fany
Do any creditors have claims secured	hv. v.a				
No. Check this box and submit this for	rm to the court with room attended				
☐ No. Check this box and submit this for ☑ Yes. Fill in all of the information below	to the court with your other s	chedules. You have noth	ing else to report on	this form.	
	•				
Part 1: List All Secured Claims					
2 List all secured of the U					
 List all secured claims. If a creditor has r for each claim. If more than one creditor has As much as possible, list the claims in alor 	nore than one secured claim, lis	t the creditor separately	Column A Amount of claim	Column B	Column C
As much as possible, list the claims in alpl	habetical order according to the	ter creditors in Part 2.	Do not deduct the	Value of collateral that supports this	Unsecured portion
2.4		creditor's flame.	value of collateral.	claim	If any
Santander Consumer USA Creditor's Name	Describe the property that se	cures the claim:	\$11,998.00	s 5,943.00	6,055.00
8585 N Stemmons Fwy Ste 1000	2005 Toyota Sienna XLI]	*	p -,
Number Street	And the second				
	As of the date you file, the cla	im is: Check all that apply	j		
Dallas TX 75247		am stat apply,			
City State ZIP Code	Unliquidated Disputed				
Who owes the debt? Check one.					
Debtor 1 only	Nature of lien. Check all that app				
Debtor 2 only	An agreement you made (sucl car loan)	h as mortgage or secured			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien	mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit	,			
Check if this claim relates to a	Other (including a right to offse	et)			
community debt					
Date debt was incurred	Last 4 digits of account number	r			
	Describe the property that sec	ures the claim:			irdustas etin telanamet palaina etensonis etopis
Creditor's Name	**************************************			\$\$_	
Number Street					
la de la companya de	As of the date you file the clair	n in Charles III			
la de la companya de	As of the date you file, the clair Contingent	n is: Check all that apply.			
City	Unliquidated	n is: Check all that apply.			
City State ZIP Code	■ Contingent	n is: Check all that apply.			
City State ZIP Code Who owes the debt? Check one.	Unliquidated				
City State ZIP Code Who owes the debt? Check one. Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply ☐ An agreement you made (such :	ι.			
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply ☐ An agreement you made (such a car loan)	r. as mortgage or secured			
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	□ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply □ An agreement you made (such car loan) □ Statutory lien (such as tax lien, recommend)	r. as mortgage or secured			
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply ☐ An agreement you made (such car loan) ☐ Statutory lien (such as tax lien, r ☐ Judgment lien from a lawsuit	/. as mortgage or secured mechanic's lien)			
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	□ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply □ An agreement you made (such car loan) □ Statutory lien (such as tax lien, r □ Judgment lien from a lawsuit	/. as mortgage or secured mechanic's lien)			The second secon
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply ☐ An agreement you made (such car loan) ☐ Statutory lien (such as tax lien, r ☐ Judgment lien from a lawsuit	/. as mortgage or secured mechanic's lien)			The state of the s

Case 16-03207 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Doc 1 Page 23 of 70 Cument Fill in this information to identify your case: Simone Robertson Debtor 1 First Name N/A Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (if known) amended filing Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount 2.1 Navient Last 4 digits of account number 0 0 1 2 Priority Creditor's Name \$ 2,962.00 \$ 2,962.00 \$ P O Box 9500 When was the debt incurred? 01/19/2007 Number Street As of the date you file, the claim is: Check all that apply Wilkes Barre PA 18773 Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were is the claim subject to offset? intoxicated Ø No Other, Specify Yes Navient Last 4 digits of account number 7,100.00 \$ 7,100.00 \$ Priority Creditor's Name 0.00 P O Box 9500 When was the debt incurred? 01/19/2007 Number As of the date you file, the claim is: Check all that apply Wilkes Barre Contingent 18773 Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt Is the claim subject to offset? Other, Specify M No ☐ Yes

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

Document Page 24 of To number (# known)

Your PRIORITY Unsecured Claims — Continuation Page Part 1:

Navient			Santa a managa a managa bandan palaban a managa banda ba
Priority Creditor's Name		Last 4 digits of account number 0 0 3 2	\$ 716.00 \$ 716.00 \$ 0.0
P O Box 9500 Number Street		When was the debt incurred? 07/05/2007	
		As of the date you file, the claim is: Check all that ap	
Wilkes Barre PA	18773	Contingent	oply.
City State		☐ Unliquidated	
Who incurred the debt? Check o	ne.	☐ Disputed	
Debtor 1 only		Type of PRIORITY unsecured claim:	
Debtor 2 only		Domestic support obligations	
Debtor 1 and Debtor 2 only At least one of the debtors and a		Taxes and certain other debts you owe the government	nt
Check if this claim is for a co		 Claims for death or personal injury while you were intoxicated 	
		Other. Specify	-
Is the claim subject to offset?			
☐ Yes			
Dept of Ed/ Navient	mittigli-etti di Stilandiqued polityli, kritik karastindensi per li metti pet za etmiste eta etmiste eta et		and the state of t
Priority Creditor's Name		Last 4 digits of account number 0 0 1 2	\$_1,249.00
P O Box 9635 Number Street		When was the debt incurred? 05/13/2008	
Number Street		As of the date you file, the claim is: Check all that app	
Wilkes Barre PA	18773	Contingent	Ny.
City State	ZIP Code	Unliquidated	
Who incurred the debt? Check one		☐ Disputed	
Debtor 1 only	9 .		
Debtor 2 only		Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Domestic support obligations	
At least one of the debtors and an	other	Taxes and certain other debts you owe the government	t
Check if this claim is for a cor		Claims for death or personal injury while you were intoxicated Other. Specify	
is the claim subject to offset?			_
☑ No ☑ Yes			
Dept of Ed/ Navient	(((())) સાહિત્યનો અહિત્યનો અને અને સાહિત કોન્ડિયાનો કોન્ડિયાનો કોન્ડિયાનો કોન્ડિયાનો કોન્ડિયાનો કાર્યું અને કોન્ડિયાનો ક		
riority Creditor's Name		Last 4 digits of account number 0 0 2 2	\$ <u>2,192.00</u> \$ <u>2,192.00</u> \$ <u>0.00</u>
P O Box 9635 Number Street		When was the debt incurred? 05/13/2008	
		As of the date you file, the claim is: Check all that apply	<i>i</i> .
Wilkes Barre PA	18773	Contingent	
Dity State	ZIP Code	☐ Unliquidated ☐ Disputed	
Vho incurred the debt? Check one. ☑ Debtor 1 only			: :
Debtor 2 only		Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Domestic support obligations	
At least one of the debtors and another	ther	Taxes and certain other debts you owe the government	
Check if this claim is for a com	munity debt	Claims for death or personal injury while you were intoxicated Other. Specify	
the claim subject to offset?			
X No			
] Yes			

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

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Page 25 of Tag number (# kg

	i ist Hante	Middle Name	Last Name		5	_	- Odde Humber (# known)
Part 1:	Your PRIC	ORITY Unsecu	red Claims	- Continuation P	age		

Dept of Ed/ Navient	
Priority Creditor's Name	Last 4 digits of account number 0 0 3 2 \$ 1,045.00 \$ 1,045.00 \$
P O Box 9635	When was the debt incurred? 12/11/2008
140tipes 2#46f	Andread Agraphical Conference of the Conference
Wilkon D	As of the date you file, the claim is: Check all that apply.
Wilkes Barre PA 18773 City State ZIP Code	Contingent
	Unliquidated Disputed
Who incurred the debt? Check one.	,
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Domestic support obligations
At least one of the debtors and another	Taxes and certain other debts you owe the government
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify
Is the claim subject to offset?	
Mo □ Yes	
Dept of Ed/ Navient	
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Wilkes Barre PA 18773	As of the date you file, the claim is: Check all that apply.
VIIKes Barre PA 18773 City State ZIP Code	Contingent Unliquidated
	Disputed
Who incurred the debt? Check one.	
☑ Debtor 1 only ☑ Debtor 2 only	Type of PRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Domestic support obligations
At least one of the debtors and another	Taxes and certain other debts you owe the government
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated
	Other. Specify
s the claim subject to offset? ₹	
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imber Street	When was the debt incurred? 04/17/2009
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y State ZIP Code	Unliquidated
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Debtor 1 only	Type of PRIORITY unsecured claim:
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Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government
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Your PRIORITY Unsecured Claims — Continuation Page

P O Box 9635 Number Street As of the date you file, the claim is: Check all that apply. Wilkes Barre PA 18773	Dept of Ed/ Navient	Last 4 digits of account number	0 0	9	2	\$_7,762.00	\$7,762.00	s 0.
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Claims for death or personal injury while you were intoxicated Other. Specify	Debtor 1 and Debtor 2 only	Domestic support obligations						
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Part 1:

Case 16-03207 Simone Robertson

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Your PRIORITY Unsecured Claims — Continuation Page

Dept of Ed/ Navient	A	2000 - 20
Priority Creditor's Name	Last 4 digits of account number 0 1 2 2	\$ <u>4,680.00</u> \$ <u>4,680.00</u> \$ <u>0.00</u>
P O Box 9635 Number Street	When was the debt incurred? 08/16/2013	
	As of the date you file, the claim is: Check all that appl	٧.
Wilkes Barre PA 18773	☐ Contingent	,
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
■ Debtor 1 only	T / PDIODEN	
Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	
Is the claim subject to offset?	Other. Specify	
☑ No		
Yes		
Dept of Ed/ Navient		
Priority Creditor's Name	Last 4 digits of account number 0 1 3 2	\$ 6,513.00 \$6,513.00 \$ 0.00
P O Box 9635	When was the debt incurred? 08/16/2013	
Number Street	OO/ 10/2013	
	As of the date you file, the claim is: Check all that apply.	
Wilkes Barre PA 18773	☐ Contingent	
City State ZIP Code	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	!
Debtor 1 only	_	:
Debtor 7 only Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
	Claims for death or personal injury while you were	
Check if this claim is for a community debt	intoxicated	
the claim subject to offset?	Other. Specify	
7 No		:
Yes		:
Pept of Ed/ Navient Iority Creditor's Name	Last 4 digits of account number 0 1 4 2	\$ 123.00 \$ 123.00 \$ 0.00
O Box 9635	N/h	
umber Street	When was the debt incurred? 09/02/2014	
	As of the date you file, the claim is: Check all that apply.	
/ilkes Barre PA 18773	Contingent	
y State ZIP Code	Unliquidated	
ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only	Domestic support obligations	
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government	
At least one of the debtors and another	Claims for death or personal injury while you were	
Check if this claim is for a community debt	intoxicated	romas v volkska kantak viviski kantak ka
the claim subject to offset?	Other. Specify	
ne claim subject to offset? No		
No		

Case 16-03207 Simone Robertson First Name Middle Name

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Debtor 1

Part 1E	Your PRIORITY U	Insecured Clai	ims Continua	tion Page

Dept of Ed/ Navient	. .	_	_		002500000000000000000000000000000000000	64/6
Priority Creditor's Name	Last 4 digits of account number 0 1 5	2	\$ <u>3,454.00</u>	\$ <u>3,454.00</u>	\$	0
P O Box 9635 Number Street	_ When was the debt incurred? 09/02/2014					
Adminer 201864	Miles and the second se					
Wilkes Barre PA 18773	As of the date you file, the claim is: Check all that	зрріу.				
Wilkes Barre PA 18773 City State ZIP Code	Contingent Unliquidated					
	Disputed					
Who incurred the debt? Check one.	☐ Disputed					
☑ Debtor 1 only	Type of PRIORITY unsecured claim:					
Debtor 2 only						
Debtor 1 and Debtor 2 only	Domestic support obligations					
At least one of the debtors and another	Taxes and certain other debts you owe the government	ent				
	Claims for death or personal injury while you were					
Check if this claim is for a community debt	intoxicated					
	Other. Specify					
s the claim subject to offset?						
No No						
Yes						
15 to		whitement artists to	tra benda katapat para keranggapan et setanga at senang	marchanis et antistanio di tingtina l'abrillatiani sancitationi qu	estine of terminal estimatory.	L-CELON/JyP
riority Creditor's Name	Last 4 digits of account number		\$	\$	\$	
	When was the debt incurred?	-				
umber Street	When was the dept incurred?					
	As of the date you file, the claim is: Check all that a	ply.				
	☐ Contingent					
ity State ZIP Code	Unliquidated					
	Disputed					
/ho incurred the debt? Check one.	- Disputed					
Debtor 1 only	Type of PRIORITY unsecured claim:					
Debtor 2 only						
Debtor 1 and Debtor 2 only	Domestic support obligations					
At least one of the debtors and another	Taxes and certain other debts you owe the governme	nt				
	Claims for death or personal injury while you were					
Check if this claim is for a community debt	Intoxicated					
Ahn state with the second	Other. Specify					
the claim subject to offset?						
No						
Yes						
	l act A digita of	(Constanting of the Constanting	Charles Adalas de marine de mention à Amelian marine de	er Territorius est attitute e figorius frances en territorius e territorius e territorius e territorius e terr	elempe med extragente	es de major
ority Creditor's Name	Last 4 digits of account number	\$	\$ _.			
mber Street	When was the debt incurred?					
	As of the date you file, the claim is: Check all that app	ly.				
	☐ Contingent	•				
State ZIP Code	Unliquidated					
	Disputed					
no incurred the debt? Check one.						
Debtor 1 only	Type of PRIORITY unsecured claim:					
Debtor 2 only						
Debtor 1 and Debtor 2 only	Domestic support obligations					
At least one of the debtors and another	Taxes and certain other debts you owe the government					
	Claims for death or personal injury while you were					
Check if this claim is for a community debt	intoxicated Other Specific	Wilesan o	\$		the desired and the second of the second	Chicas
he claim subject to offset?	Other. Specify	-				
ne ciaim subject to offset?						

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 30 of Page 30 o

Part 2: List All of Your NONPRIORITY Unsecured Claims

3	. Do any creditors have nonpriority u No. You have nothing to report in t Yes	i nsecured this part. S	claims against y	you? the court with your other schedules.		
4. 3.4 3.4 3.4 3.4 3.4	List all of your nonpriority unsecure	editor sepa	ni ine alphabetic	al order of the creditor who holds each claim. If a creditor haim. For each claim listed, identify what type of claim it is. Do no, list the other creditors in Part 3.If you have more than three r	as more	than one
4.1	American Access Casualty Co	omp		Last 4 digits of account number 1 4 9 6	Tol	tal claim
	Nonpriority Creditor's Name 1 S 450 Summit Ave Ste 230			When was the debt incurred? 07/19/2013	\$	812.00
	Number Street Oakbrook Terrace	IL	60181			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only			Contingent Unfiquidated Disputed		
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a commu Is the claim subject to offset? ☑ No ☐ Yes	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt Other. Specify Credit use 	s.	
4.2	AT&T U-Verse	nejmen jedenčenji potestvočečeni	ladineeli etiini ja kantiiseela haaniini kilonelista kantiini kilooliisi kantiini kilooliisi kantiini kiloolii		mentonicomasco	politima propieta nostrone repropieta protectiva en esta esta esta esta esta esta esta en esta esta esta esta e
	Nonpriority Creditor's Name 208 South Akard St			Last 4 digits of account number $\frac{7}{04/07/2014}$ When was the debt incurred? $\frac{04/07/2014}{04/07/2014}$	\$	334.00
	Number Street Dallas City	TX	75218	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another Check if this claim is for a commun	iity daht		Student loans Obligations arising out of a separation agreement or divorce		:
	Is the claim subject to offset? ☑ No ☑ Yes	,		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u>		
4.3	Avon	ritari artareari, trigorini storancea	e a golfach he feinighte so de geleger i he golfach ein seamh i he gelegen gelein ag		de line (18 m. Deschief schemmelse)	
	Nonpriority Creditor's Name 777 Third Avenue			Last 4 digits of account number 8 3 1 5 When was the debt incurred?	\$	250.00
	0.1	NY State	10017 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Olate	ZIP Code	Contingent Unliquidated Disputed		
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	Check if this claim is for a communi	ty debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset? ✓ No ✓ Yes			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u>		
	_ 100					

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 31 of Tanage Transport (# known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

-	Briggs Ophthalmology & Assoc			Last 4 digits of account number 5 9 8 9	s 102.(
2	4 Joliet St Ste 201			When was the debt incurred?	\$
	umber Street)yer	IN	46311	As of the date you file, the claim is: Check all that apply.	
Ci		State	ZIP Code	Contingent	
10	/ho incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and anothe	r		Student loans	
	Check if this claim is for a commi	ınity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical	
	No			Cities. Specify "Housean	
	Yes				
CI	harter Fitness	in the state of th	al transford pressure to recommend of environs the standard and environ-standard	Last 4 digits of account number 4 7 9 9	400.0
	npriority Creditor's Name			Manage Control of the	s <u> </u>
	055 N Broadway			When was the debt incurred? 02/03/2016	
	nber Street errillville	15.1	10115	As of the date you file the state of the sta	
City		IN State	46410 ZIP Code	As of the date you file, the claim is: Check all that apply.	
·		Siate	ZIP Code	Contingent Unliquidated	
	no incurred the debt? Check one.			Disputed	
	Debtor 1 only				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			☐ Student loans	
				Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commun	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	he claim subject to offset?			Other. Specify Credit use	
Z				a only of our add	
	Yes				
Ch	ase Bank		e pumangaran manarapidah dahir pengangan mengka terdimeter sambin	Last 4 digits of account number 0 3 4 5	\$ 500.0
Nonp	oriority Creditor's Name				
270 Numi	O Park Avenue			When was the debt incurred? 02/01/2016	
Ne	w York	NY	10017	As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	Contingent	
Who	incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
<i>ا</i>	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
□ c	Check if this claim is for a commun	ity debt		you did not report as priority claims	
	e claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
ØN				Other. Specify Credit use	

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

Document Page 32 of 70

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

[City of Chicago/ Dept of F			0.05.0	
	Nonpriority Creditor's Name	kevenue		Last 4 digits of account number 6 3 5 0	\$122.00
	121 N LaSalle St			When was the debt incurred? 05/02/2013	
	Chicago	IL	60602	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check or	ne.		Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and ar			☐ Student loans	
				Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a co	mmunity deb	t	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify ticket	
	☑ No ☑ Yes				
8	The Control of American control of American State of American Stat	900 de 2004 (1600 de 2004) de 2004 (1600 de 2004)	સ્તિનિ ફર્મ કર્યા કર્યા અને ત્રારા ભાગમાં કેમ્પ્લ કરવા કરવા અને અમારા ભાગ કેમ્પ્લ કર્યા છે. જ કરવા હતા અને કેમ્પ્લ		weathers and the familiar parameters of the same and secure of the same and the same and the same and the same
	ChexSystem			Last 4 digits of account number 8 3 1 5	s 0.00
	Nonpriority Creditor's Name		**************************************		5
	7805 Hudson Rd Ste 100			When was the debt incurred? 02/03/2016	
	Woodbury	MN	55125	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one			Unliquidated	
	Debtor 1 only	•		☐ Disputed	
	Debtar 2 only			Type of MONDPHODITY	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and and	other		Student loans Obligations arising out of a separation agreement and inventor	
	Check if this claim is for a coπ	munity debt		you did not report as priority claims	
	Is the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts	
	☑ No			Other. Specify notice only	
	Yes				
9		entite (heriotessentessene) en zeen (heriotessene) se	nnera krissista ki iyakidi kri errakiyasir, krissiyasir, krissiyasir (Arizadok Aribedok		
	Comcast Cable			Last 4 digits of account number 8 3 1 5	\$324.00
	Nonpriority Creditor's Name			The state of the s	•
	P O Box 3002 Number Street			When was the debt incurred? 10/13/2015	
	Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Time of MONDRIGHT	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and anot	her		Student loans Obligations origing out of a page 11.	
	☐ Check if this claim is for a com	nunity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	į
	☑ No			Other. Specify <u>Credit use</u>	
	☐ Yes				

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

Document Page 33 of To number (# known)

Part 2:

F	art 2: Your NONPRIORITY	Unsecured	Claims — Conti	nuation Page	
A	fter listing any entries on this p	age, number t	hem beginning w	ith 4.4, followed by 4.5, and so forth.	Total claim
10	── Comcast Cable			Last 4 digits of account number 8 3 1 5	s 459.00
	Nonpriority Creditor's Name P O Box 3002			When was the debt incurred? 11/27/2012	5
	Number Street			AMARIAN AND AND AND AND AND AND AND AND AND A	
	Southeastern City	PA State	19398 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check		211 0000	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only			To a Chiana and a	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and	another		Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a c	ommunity deb	t	you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use	
	☑ No ☐ Yes				:
11	Committee and the experience of the experience o	TO MANAGES TO STORE AND A STREET OF THE STREET AND A STREET OF THE STREET AND A STR			-theretigh the established of the established by the established produced processing a support of
	Comcast Cable Nonpriority Creditor's Name			Last 4 digits of account number 9 5 2 2	\$ <u>1,114.00</u>
	16650 S Oak Park Ave			When was the debt incurred? 11/27/2012	
	Tinley Park	IL	60477	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check or	ne.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only			□ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and a	nother		Student loans	
	☐ Check if this claim is for a co			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	minunity dept		Debts to pension or profit-sharing plans, and other similar debts	1
	No			Other. Specify Credit use	
	Yes				
12		Meromanin kalipinin hikubin barilungah kenilari, oral	9994 – Arton of Contracting Algerial and Arton Station (In Association In Stationary Association In Stationary		\$ 60.00
	Community Healthcare Sy Nonpriority Creditor's Name	stem		Last 4 digits of account number 9 4 1 2	·
	P O Box 3604 Number Street			When was the debt incurred? 02/10/2015	
	Munster	IN	46321	As of the date you file, the claim is: Check all that apply.	
	•	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one	∍.		Disputed	
	Debtor 1 only Debtor 2 only				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and and	other		Student loans Obligations arising out of a constraint agreement at the state of t	
	Check if this claim is for a con	nmunity debt		you did not report as priority claims	
	Is the claim subject to offset?	,		Debts to pension or profit-sharing plans, and other similar debts	
	☑ No □ Yes			Other, Specify medical	
	ere a como a como a manda de la manda de la casa de				

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 34 of 70 Case number (# known)

Middle Name

Your NONPRIORITY Unsecured Claims — Continuation Page

EMP of Cook County			Last 4 digits of account number 6 3 8 5		40
Nonpriority Creditor's Name 100 South Owasso Bly	(a) \A/		When was the debt incurred? 07/04/2015	\$	43
Number Street	u vvest				
St Paul	MN	55117	As of the date you file, the claim is: Check all that apply.		
•	State	ZIP Code	Contingent		
Who incurred the debt? Chec	ck one.		☐ Unliquidated☐ Disputed		
Debtor 1 only			Copulou		
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors ar	nd another		Student loans		
☐ Check if this claim is for a		t	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Is the claim subject to offset	_		Debts to pension or profit-sharing plans, and other similar debts		
☑ No	•		Other. Specify medical		
☐ Yes					
haliman kanalan Prosent Comment Andronom Kempangkan mengengah Lymbong eta makan bangsah kemban bangsah kanalan	ત્વન ફાઇપ્પેલામ કેન્જાદાતા છે. કંપ્યું પ્રેમણે ૧૧ ફાલાઇક્સ્ટ્રોમ્પ ફેમ્પ્લેન ફાત નદા ક્લાઇટ પ્રયોણો	an Martin and an annual state of the state of		of the state of th	*94N3# ₁₀ 510
Enterprise Rent-A-Car	Violations		Last 4 digits of account number 1 4 9 8	\$	18
P O Box 99			When was the debt incurred? 02/19/2013		
Number Street			THE ADMINISTRATION OF THE PROPERTY OF THE PROP		
Lombard	IL	60148	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check	one.		Unliquidated		
☑ Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONDRIGHTY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	another		Student loans		
Check if this claim is for a	community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
No			Other. Specify credit use		
Yes					
- water to the contract of the	Pocarametris et al-gentro et al-grande al servici de la servici de la servici de la servici de la servici de l	રોલેન્સન સ્થિતું અને 27 માટે લાગારા છે. કેલ્લા સ્થિત અને સ્થાપના અને કૃષ્ણ કરવા કરવા કરવા છે. અને સ્થાપના સ્થા ત્રાંત્ર અને સ્થાપના સ		24min 45 of Shift or the firm and shops	~~~~
Equifax Nonpriority Creditor's Name			Last 4 digits of account number 8 3 1 5	\$	0.
P O Box 740241			When was the debt incurred? 02/03/2016		
Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.		
ony.	State	ZIP Code	Contingent		
Who incurred the debt? Check	one.		Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Student loans Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a c	ommunity debt		you did not report as priority claims		
	•		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other, Specify notice only		

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Simone Robertson Document Page 35 of 70 number (if known)

Experian			Lond Authority as		
Nonpriority Creditor's Name			Last 4 digits of account number 8 3 1 5	\$	0
P O Box 2002			When was the debt incurred? 02/03/2016		
Number Street Allen	TX	75013	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt?	Check one		☐ Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2	only		Student loans		
At least one of the debt			Obligations arising out of a separation agreement or divorce that		
Check if this claim is	for a community deb	t	you did not report as priority claims		
Is the claim subject to o	ffset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only		
☑ No			Other. Specify House Offly		
Yes					
**************************************	English et herste engelegen geheld sterke sterke sterke et de englishe et sterkeligt is de engels hers	ergy protesty and an amount of the responsive and the state of the sta		**************************************	***************************************
Family Medicine &	Vellness		Last 4 digits of account number 9 6 5 6	_	85.
Nonpriority Creditor's Name				\$	
5495 Broadway			When was the debt incurred? 11/19/2013		
Number Street Merrillville	!N	40440	As of the date you file, the claim is: Check all that apply.		
City	IIV State	46410 ZIP Code			
		2.7 0000	☐ Contingent☐ Unliquidated		
Who incurred the debt?	Check one.		Disputed		
Debtor 1 only			,		
Debtor 2 only Debtor 1 and Debtor 2 or	d.		Type of NONPRIORITY unsecured claim:		
At least one of the debto	ily E and another		☐ Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is			you did not report as priority claims		
Is the claim subject to off	set?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify_medical		
☑ No			_ Onto opooliy		
Yes					
	erene kerinangan pada dipungan tersebah permenentan dipuntan pengangan pengangan pengangan pengangan pengangan	ine a de travella esta esta esta esta esta esta esta est	Notice the properties of the	tetaria etira egizia gia	375.(
1st Loans Nonpriority Creditor's Name			Last 4 digits of account number 1 2 2 4	\$	
1205 E Sibley Blvd			When was the debt incurred?		
Number Street Dolton	L	60419	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
MANGE A STATE OF THE STATE OF T			Unliquidated		
Who incurred the debt? C	neck one.		Disputed		
Debtor 1 only Debtor 2 only					
Debtor 2 only Debtor 1 and Debtor 2 onl	.,		Type of NONPRIORITY unsecured claim:		
At least one of the debtors	y . and another		☐ Student loans		
Check if this claim is fo			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	_		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offs	et?		Other. Specify Credit use		
☑ No ☐ Yes					

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 36 of 70 number (#known)

Middle Name

Your NONPRIORITY Unsecured Claims — Continuation Page

Franciscan Allianc	a		Lact Address of annual Co. 7 4 2	24.000.000.000.000.000.000
Nonpriority Creditor's Name	V		Last 4 digits of account number 9 7 1 3	s8
28044 Network Pla	ice		When was the debt incurred? $\frac{07/27/2015}{}$	
Chicago	1L	60673	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt?	Check one.		Unliquidated	
Debtor 1 only			Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2			Student loans	
At least one of the debt			Obligations arising out of a separation agreement or divorce that	
Check if this claim is	for a community debt		you did not report as priority claims	
Is the claim subject to o	ffset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical	
☑ No			Other, Specify Medical	
Yes				
NE POLYMARION PROPERTY AND THE AND THE POLYMARIA PROPERTY PROPERTY AND THE POLYMARIA PROPERTY	\$	મુક્તિ કરો છે. કે પ્રત્યાન કરિકાર કરો કરો કરો છે. એક કર્યું અને કર્યા કરો		to the second of
Franciscan Alliance			Last 4 digits of account number 4 5 7 8	s 400
28044 Network Place			When was the debt incurred? 07/04/2015	-
Number Street	:e		- Vitell was the dept incurred?	
Chicago	IL	60673	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? (Sheek one		☐ Unliquidated	
Debtor 1 only	Direct Offe.		☐ Disputed	
Debtor 2 only			Torrest MONDELO TORREST	
Debtor 1 and Debtor 2 or	nly		Type of NONPRIORITY unsecured claim:	
At least one of the debtor	rs and another		Student loans Obligations grising out of a separation agreement as discuss that	
Check if this claim is t	for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to off	"		Debts to pension or profit-sharing plans, and other similar debts	
☑ No	SCLF		Other. Specify medical	
Yes				
		i kapunany 11 roke na kapunanyananya esamenya berahanya katana periodika		-Stanonomers (manne grape)
Gary Methodist Hosp Nonpriority Creditor's Name	oital		Last 4 digits of account number 8 3 1 5	\$891.
600 Grant St			When was the debt incurred?	
Number Street Gary	IN	46402	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
Who incurred the debt? C	hack one		☐ Unliquidated	
Debtor 1 only	NOOK UNE.		☐ Disputed	
Debtor 2 only			Time of NONERROR	
Debtor 1 and Debtor 2 onl	у		Type of NONPRIORITY unsecured claim:	
At least one of the debtors	and another		Student loans	
Check if this claim is fo	or a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
s the claim subject to offs			Debts to pension or profit-sharing plans, and other similar debts	
No No	GEE		☑ Other, Specify medical	
Yes				

Case 16-03207 Simone Robertson First Name Middle Name

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 37 of Onumber (# known)

2:	Your	NONPRIORITY	Unsecured	Claims —	Continuation	Pag
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٦				al cl
Ginny's			Last 4 digits of account number 8 3 1 5	30
Nonpriority Creditor's Name 1112 7th Avenue			When was the debt incurred?	30
Number Street Monroe	WI	53566	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ak ana		Unliquidated	
Debtor 1 only	ck one.		☐ Disputed	
Debtor 2 only			T. (Manager	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors ar	nd another		Student loans	
Check if this claim is for			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset	?		Other, Specify Credit use	
☑ No ☐ Yes				
t til til eller som at knowledge medlem for ekste medlem for ekste som at som for ekste som stande skrivet som	an keramatan kembanakan diperseksi pelakan keramakan keramakan keramakan keramakan keramakan keramakan keramak			
Great American Financ	ial Compony	1 common 1 c	Last 4 digits of account number 1 5 8 5 s 1.3	trontonia
Nonpriority Creditor's Name	ius Company		Last 4 digits of account number 1 5 8 5 s 1,	234
20 N Wacker Dr Ste 22	275		When was the debt incurred? 06/02/2015	
Chicago	JL	60606	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check			Unliquidated	
	cone.		☐ Disputed	
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	d another		Student loans	
			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a			you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
₩ No				
Yes				
IL Tollway	e annealment a transmit in violent plus provident Charles and national to Antiblical Geologic	and the second account of the second and account of the second second	Last A digite of social the survey of the su	0.
Nonpriority Creditor's Name			Last 4 digits of account number 8 3 1 5	
2700 Ogden Ave			When was the debt incurred?	
Number Street	***************************************	***************************************	The state of the s	
Downers Grove	IL	60515	As of the date you file, the claim is: Check all that apply.	
City	State Z	IP Code	□ Contingent	
Who incurred the debt? Check	one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONDDIODITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loans	
Check if this claim is for a c	ommunity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
No No			Other. Specify notice only	
KH 140				

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 38 of 70 Case number (# known)

Debtor 1

Methodist Hospitals Nonpriority Creditor's Name			Last 4 digits of account number 9 8 0 6	s 67.0			
P O Box 660346			When was the debt incurred? 08/17/2011	Ψ			
Number Street Indianapolis	IN	46266	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Chec	k one.		Unliquidated Disputed				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only							
			Type of NONPRIORITY unsecured claim:				
At least one of the debtors an	d another		Student loansObligations arising out of a separation agreement or divorce that				
Check if this claim is for a	community debt		you did not report as priority claims				
Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical				
☑ No ☑ Yes							
The standard standard of the s	Primetod Vanedaniska erreksynska strenovatiski votokoli votokoli votokoli votokoli votokoli votokoli votokoli	ned Northern North (red Springer Communication & Belle har old reference as a communication of the communication o					
Methodist Hospitals			Last 4 digits of account number 9 8 0 6				
Nonpriority Creditor's Name			THE PARTY SAMERA	s27.0			
6121 Cleveland Number Street			When was the debt incurred? 04/11/2012				
Merrillville	IN	46410	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Check	one.		☐ Unliquidated ☐ Disputed				
Debtor 1 only			- Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
At least one of the debtors and	another		Student loans				
Check if this claim is for a	community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify_medical				
☑ No			Other. Specify ITIEGICAL				
Yes							
MetroStyle	\$\$\$ \$ ~ \$\$\$\$\$\$. \$\\\\\\\\\\\\\\\\\\\\\\\	reformational to the standards produces. I decidence the Section Accommendate to providing		s 400.00			
Nonpriority Creditor's Name			Last 4 digits of account number 8 3 1 5				
500 Bic Drive Bldg 4			When was the debt incurred? 01/10/2008				
Milford	СТ	06461	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Check of	one.		☐ Unliquidated☐ Disputed				
Debtor 1 only			₩ Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
At least one of the debtors and a	nother		☐ Student loans				
☐ Check if this claim is for a c			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
Is the claim subject to offset?	and and		Debts to pension or profit-sharing plans, and other similar debts				
☑ No ☐ Yes			Other Specify Credit use	•			

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 39 of 70 Case number (# known)

P Num In City State of the City Non Authority City	ho incurred the debt? Check one. The Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a commette claim subject to offset? No Yes COT Gas Priority Creditor's Name O Box 190 The Debtor 1 only The Check one. The Ch		46206 ZIP Code	When was the debt incurred? 09/15/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical				
P Num Au	O Box 3248 Imber Street Indianapolis The incurred the debt? Check one. I Debtor 1 only I Debtor 2 only I Debtor 1 and Debtor 2 only I At least one of the debtors and anoth Check if this claim is for a committee claim subject to offset? No Yes COT Gas Priority Creditor's Name O Box 190 Ibber Street	State	ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical				
In Gir, Wr 22 State Stat	ho incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a commette claim subject to offset? No Yes COT Gas Priority Creditor's Name O Box 190 Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 \$				
Is t 22 Nice None August City	ho incurred the debt? Check one. The Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a commette claim subject to offset? No Yes COT Gas Priority Creditor's Name O Box 190 The Debtor 1 only The Check one. The Ch	ner		Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 \$				
Is t 27 Nice None Au	Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and anoth Check if this claim is for a comm the claim subject to offset? No Yes COF Gas priority Creditor's Name O Box 190 ther Street		t 1000 protestant see see see see see see see see see se	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 5				
Is to the state of	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a comm the claim subject to offset? No Yes COF Gas priority Creditor's Name O Box 190 ther Street		t 1800 var	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 5				
Is to see the see that the see	Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a comm the claim subject to offset? No Yes COF Gas priority Creditor's Name O Box 190 ther Street		t 100 m protestant se seu est se si se	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 5				
Is to see the	At least one of the debtors and anoth Check if this claim is for a comm the claim subject to offset? No Yes COT Gas priority Creditor's Name O Box 190 ther Street		T die verwerber de de personale de des situations de son die verwerber en une	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 5				
Is to see the	Check if this claim is for a commente claim subject to offset? No Yes COT Gas priority Creditor's Name O Box 190 liber Street		t to a second and the	Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical Last 4 digits of account number 2 9 9 1 \$				
Nic None P (Numi Auti	No Yes COT Gas priority Creditor's Name O Box 190 liber Street	ministrative parties at the animal	t to the second	Cother. Specify Medical Last 4 digits of account number 2 9 9 1 \$				
Nic Nonp P C Numi Au	COT Gas priority Creditor's Name O Box 190 liber Street	m thai shi tamann tangun ku a kha a a kha ca	e til en grenne med seknet senten skalle skille	Last 4 digits of account number 2 9 9 1 \$				
Nic None P (Numi Auti City	cor Gas priority Creditor's Name O Box 190 liber Street	m the side that and side of a side o	9 Story and Australia Marie Story and Australia Marie Story and Australia Marie Australia (Australia Australia	——————————————————————————————————————				
Nic None P C Numi Aut	priority Creditor's Name O Box 190 ber Street	militari dal Barradori Barradori de a esperio estabelegia.	t Construction of the cons	——————————————————————————————————————				
P (Numi Au City	priority Creditor's Name O Box 190 ber Street			——————————————————————————————————————				
P (Numi Au City	O Box 190 Der Street							
Au City				When was the debt incurred? 02/03/2016				
·	ırora	IL	60507	As of the date you file, the claim is: Check all that apply.				
Who		State	ZIP Code	Contingent				
	o incurred the debt? Check one.			☐ Unliquidated				
⊿ r	Debtor 1 only			☐ Disputed				
	Debtor 2 only			Torres of MONIPPLE Prime				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Δ .	At least one of the debtors and another	er		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 				
	Check if this claim is for a commu	unity debt						
	ne claim subject to offset?							
M N				Other, Specify Credit use				
☐ Y								
]	Por Agricultura (Campara Campara Agricultura (Campara Campara Campara Campara Campara Campara Campara (Campara Campara Campara (Campara Campara Campa	entroperate provide perfect confined by A belief	erritatus morphistos eritaria mai cultivori, e annua amenina esculprimeira e annua	etronecia en respetamenta como como contra en actual en				
Nips	SCO riority Creditor's Name			Last 4 digits of account number 0 0 8 3				
	Box 13018		****	When was the debt incurred? 01/10/2008				
	rillville	IN	46411	As of the date you file, the claim is: Check all that apply.				
City		State	ZIP Code	Contingent				
Who	incurred the debt? Check one.			Unliquidated				
	ebtor 1 only			Disputed				
☐ De	ebtor 2 only			Type of NONDRIODITY upgening to the				
☐ De	ebtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
□ At	t least one of the debtors and another			Student loans Obligations arising out of a consentian account to				
CI CI	heck if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	claim subject to offset?	_		Debts to pension or profit-sharing plans, and other similar debts				
☑ No ☐ Ye	0			Other. Specify_Credit use				

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 40 of 70 Case number (# known)

Middle Name

Number Size	Nipsco			Last A digita of processes 1 0 0 7 0			
Manufactive Sinet N 46411 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Debtor 1 and Debtor 2 only Debtor 2 and Debtor 3 and 3	Nonpriority Creditor's Name			Last 4 digits of account number 0 0 7 6	\$\$		
Merrillville N				When was the debt incurred? 09/15/2015			
Contingent Who incurred the debt? Check one. Contingent Unfliquidated		IN	46411	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 4 and Debtor 4 and Debtor 5 and Debtor 6 and Debtor 7 and Debtor 7 and Debtor 7 and Debtor 8 and 0 and	City	State					
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? Nipsco Nipsco Nipsco Nipsco Nipspony Gredier's Name PO BOx 13018 Number Street Merriffiville IN 46411 City Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Northwest Emergency Assoc. Last 4 digits of account number 0 0 1 9 s_ When was the debt incurred? Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 onl Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debto	Who incurred the debt? Che	ock one					
Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Deb		one one.		☐ Disputed			
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Nipsco Nemptority Greddor's Name POBOX 13018 Nonhar Street Merrillville Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Northwest Emergency Assoc. Northwest	Debtor 2 only			Type of NONDBIODITY appearant at the			
Check if this claim is for a community debt is the claim subject to offset? In No							
Last 4 digits of account number 0 0 1 9 \$ Nipsco Norprindy Creditor's Name PO Box 13018 Number Street When was the debt incurred? 09/09/2015 Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim singular of profits haring plans, and other similar debts Northwest Emergency Assoc. Last 4 digits of account number 0 0 1 9 \$ When was the debt incurred? 09/09/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt She claim subject to offset? When was the debt incurred? 03/08/2011 As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt She claim subject to offset? Check if this claim is for a community debt subject to offset? Check if this claim is for a community debt subject to offset? Check if this claim is for a community debt subject to offset? Check if this claim is for a community debt subject to offset? Check if this claim is check all that apply. Chec	☐ Check if this claim is for a community debt						
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Nipsco Nonprintity Creation's Name POBOX 13018 Number Street When was the debt incurred? 09/09/2015 As of the date you file, the claim is: Check all that apply. City State ZiP Code Contingent Unliquidated Disputed Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Northwest Emergency Assoc. Comprinty Creation's Name Contingent Conting				Debts to pension or profit-sharing plans, and other similar debts			
Nipsco Nonpriority Creditor's Name P O Box 13018 Number Street Merrillville IN 46411 City State ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Northwest Emergency Assoc. Northwest Emergency Assoc. State ZiP Code Northwest Emer				Other. Specify Credit use			
Nonprinity Creditor's Name POBox 13018 When was the debt incurred? 09/09/2015 Merrillville IN 46411 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Orthwest Emergency Assoc. Last 4 digits of account number 3 5 4 9 Server Hinsdale When was the debt incurred? 09/09/2015 As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use When was the debt incurred? 03/08/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Street disputed Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Colliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Colliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Colliquidated Disputed	W Yes	die Film entwer der Sie Kalendarie von die Antwerse von der Antwerse von der Verweise der Verweise der Verweise	iiiIV/gggriigiihde kajjiriikke kajjiriikke koolisiiiikke koolisiiikke koolisiiikke kajka kajiriikke koolisiiik				
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Number Street Merrillville IN 46411 As of the date you file, the claim is: Check all that apply. City State ZiP Code Contingent Unliquidated Disputed				Paris Control of the	Ψ		
City State ZIP Code Contingent Co				when was the debt incurred?			
City State ZIP Code Contingent Co		IN	46411	As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one. Debtor 1 only	City	State					
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Northwest Emergency Assoc. Last 4 digits of account number 3 5 4 9 Sections Street Choppriority Creditor's Name Debtor 2 only Street Chinsdale IL 60522 Sity State ZIP Code When was the debt incurred? Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Credit use When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 2 only Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 2 only Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Type of NONPRIORITY unsecured claim:	Who incurred the debt? Chec	k one		☐ Unliquidated			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Vorthwest Emergency Assoc. □ Vorthwest Emergency Assoc. □ Debtor 1 and Debtor 2 only □ State □ IL 60522 □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 4 as priority claims □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement as divorce that you did not report as priority claims □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Debtor 2 a separation agreement as divorce that you did not report as priority claims □ Obligations arising out of a separation agreement as divorce that you did not report as divorce that you did not report as priority claims □ Debtor 1 and Debtor 2 only □ Student loans □ Obligations arising out of a separation agreement as divorce that you did not report as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that you did not report as a separation agreement as divorce that yo				Disputed			
At least one of the debtors and another Student loans				Type of NONPRIORITY unsequend olding			
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Contingent Unliquidated Unliqui			60522	As of the date you file, the claim is: Check all that apply.			
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Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement at these above.				☐ Disputed			
At least one of the debtors and another Student loans Obligations arising out of a separation agreement as diverse that				Type of NONPRIORITY unsecured claim:			
Obligations arising out of a separation agreement as divisors that	Debtor 1 and Debtor 2 only						
Check if this claim is for a community debt you did not report as priority claims				Obligations arising out of a separation agreement or divorce that			
Doctor to make the second of t		community debt		you did not report as priority claims			
the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical	the claim subject to offset?			Uebts to pension or profit-sharing plans, and other similar debts Other Specify medical			

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 41 of 70 number (if known)

Part 2:

PA Turnpike Comm			ith 4.4, followed by 4.5, and so forth. Last 4 digits of account number 6 3 9 5	Total claim
8000 C Derry St			When was the debt incurred? 05/12/2014	\$ <u>78.0</u>
Number Street Harrisburg	PA	47444	As of the date you file, the claim is: Check all that apply.	
City	State	17111 ZIP Code	**************************************	
Who incurred the debt? O		Lii Odde	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtor	s and another		Student loans	
☐ Check if this claim is f			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offs	set?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify_Credit use	
✓ No☐ Yes			Cities, Specify Credit use	
— Tes	PPG Ser FRA PRINTERS SHOUTH AND PRINTERS AND	. ત નવારાનનું કે અને ભારતાન કરમાં જ્યાર સ્થાપ કરતા કે પ્રત્યા કરતા છે. જે તમારે કે આ પ્રત્યા કરતા છે. જે તમારે 		
QC Financial Service	s/ National Quik	Cash	Last 4 digits of account number 9 8 0 5	s <u>1,536.00</u>
1451 Sibley Blvd			When was the debt incurred?	
Calumet City	IL	60409	As of the date you file, the claim is: Check all that apply.	
City	State	ZiP Code	☐ Contingent	
Who incurred the debt? Ch	eck one		Unliquidated	
Debtor 1 only	ison one,		☐ Disputed	
Debtor 2 only			Tung of MOMPHOPITY	
Debtor 1 and Debtor 2 only	,		Type of NONPRIORITY unsecured claim:	
At least one of the debtors	and another		Student loans Obligations estates and of a sure of	
Check if this claim is fo	r a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offse ✓ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use	
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Sprint Ionpriority Creditor's Name			Last 4 digits of account number 8 3 1 5	\$_2,000.00
P O Box 8077			When was the debt incurred?	
lumber Street	***************************************			
ondon	KY	40742	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
Vho incurred the debt? Che	ck one,		Unliquidated	:
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors a			Obligations arising out of a separation agreement or divorce that	; }
Check if this claim is for	a community debt		you did not report as priority claims	
the claim subject to offset	?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use	

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 42 of 70 Case number (# known)

Middle Name

'	Of Cothesian 1 11 11				*100	BA ANSEN BAN
	St Catherine's Hospital Nonpriority Creditor's Name			Last 4 digits of account number 8 2 6 7	\$	23
	9660 Wicker Ave			When was the debt incurred? 03/23/2011	V	
	St John	IN	46373	As of the date you file, the claim is: Check all that apply.		
ì	City	State	ZIP Code	Contingent		
1	Who incurred the debt? Check one	١.		☐ Unliquidated		
į	Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
ſ	Debtor 1 and Debtor 2 only			☐ Student loans		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt is the claim subject to offset?			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
				Debts to pension or profit-sharing plans, and other similar debts		
8	☑ No ☑ Yes			☑ Other, Specify medical		
7~		t of training of the state of t	t O APP APP APP TO THE STATE OF THE STATE APP APP APP APP APP APP APP APP APP AP		S. Clintin in the second	
ב מ	St Catherine's Hospital			Last 4 digits of account number 0 1 4 9	\$	160
9	9660 Wicker Ave			When was the debt incurred? 03/23/2011		
	umber Street			**************************************		
	St John ity	IN	46373	As of the date you file, the claim is: Check all that apply.		
		State	ZIP Code	☐ Contingent		
	Vho incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only			₩ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and anoth			☐ Student loans		
				Obligations arising out of a separation agreement or divorce that		
	Check if this claim is for a comm	nunity debt		you did not report as priority claims		
	the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical		
	No Yes			Siles. Specify Tricurodi		
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S _{Noi}	ynchrony Bank/ Victoria Se	crets		Last 4 digits of account number 8 3 1 5	\$	300.
	O Box 965037			When was the debt incurred?		
Oi City	rlando	FL	32896	As of the date you file, the claim is: Check all that apply.		
	,	State	ZIP Code	Contingent		
WI	no incurred the debt? Check one.			☐ Unliquidated☐ Disputed		
	Debtor 1 only			■ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
	Check if this claim is for a commi	unity debt		you did not report as priority claims		
is t	he claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify credit use		
	No			- Oner, Specify Order USE		

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 43 of 70

The Roomplace/ GAFC	0		Last 4 digits of account number 0 1 9 0	
Nonpriority Creditor's Name 1000 N Rohlwing Rd Ste 46			When was the debt incurred? 06/02/2015	\$
Number Street Lombard	IL	CO440	As of the date you file, the claim is: Check all that apply.	
City	IL. State	60148 ZIP Code	Contingent	
Who incurred the debt? Checl			Unliquidated	
Debtor 1 only	cone.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce that	
			you did not report as priority claims	
Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts Other, Specify Notice Only	
☑ No			other, Specify Houce Offity	
Yes				
"ternak hadidi dirilimendatisis birdi entisba direktenguri yazan da 1881/1944 ya 1846 distributur garikuti espenya isak babi	erroren bekonstatuta kentasan pentasan pentasan samun samun samun bekonstatuten bekonstatut	killin ki serim timber kepita 4.4, her menter ekik kilembyé és és kilendi den timban ek menter		
T-Mobile Nonpriority Creditor's Name			Last 4 digits of account number 6 9 5 5	<u>\$_1,206</u>
12920 SE 38th St			When was the debt incurred?	
Bellevue	WA	98006	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one		Unliquidated	
☑ Debtor 1 only	5,10,		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?			 Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Credit use 	
Mo No			a onio: openly oroate ado	
Yes	entantis exemple philips of Arthur Assessment Communications	Pathagan Vincentin		
T-Mobile			Last 4 digits of account number 4 4 8 1	\$ <u>183</u> .
Nonpriority Creditor's Name			and the second s	
P O Box 742596 Number Street			When was the debt incurred? 05/12/2013	
Cincinnati	ОН	45274	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
Who incurred the debt? Check of			Unliquidated	
Debtor 1 only	nt.		☐ Disputed	
Debtor 2 only			Type of NONDRIADITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and a	nother		Student loans Obligations existing out of a consention and action in the state of the s	
Check if this claim is for a c	ommunity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
			Other, Specify Credit use	

Part 2:

Simone Robertson

Document

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 44 of 70
Case number (# known)

Village of Midlothian			Last 4 digits of account number 3 4 2 1	400
Nonpriority Creditor's Name 14801 Pulaski Rd Number Street			When was the debt incurred? 10/11/2012	\$ <u>100.0</u>
Number Street Midlothian	14	60445	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim is for	State eck one. and another a community debt	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify ticket	
☐ Yes Western Suburban Au	k mara punda kana merupungan kana kana kana kana kana kana kana	જે કે જે જ જામ કહિલાના કરવામાં મહિલાની માત્ર કાર્યકાર તેમ કે જેવા છે. તેને જે	Last 4 digits of account number 8 3 1 5	TO A O O O
Nonpriority Creditor's Name			When was the debt incurred? 04/16/2015	<u>\$ 7,106.0</u>
2250 N Mannheim Rd Number Street			THE RESERVE OF THE PARTY OF THE	
Melrose Park	IL State	60164 ZIP Code	As of the date you file, the claim is: Check all that apply. — Contingent	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this claim is for a list the claim subject to offset No Yes	nd another a community debt		☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit use	
William Hackel	galang mengangan pengangan	NORTHWEST HE STAND S	Last 4 digits of account number 8 3 1 5	\$ 0.0
Nonpriority Creditor's Name 991 Ellsworth Pl			When was the debt incurred? 05/31/2015	
Number Street Gary City	IN State	46404 ZIP Code	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a s the claim subject to offset?	l another		☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify notice only	

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 45 of 70

				1909/9000		
Aarons Inc			Last 4 digits of account number 8 4 6 4			
Nonpriority Creditor's Name 309 E Paces Ferry Rd	onpriority Creditor's Name 09 E Paces Ferry Rd NE		When was the debt incurred?	\$		
Number Street Atlanta	GA	30305	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	Contingent			
Who incurred the debt? Chec	,		Unliquidated			
Debtor 1 only	ok one,		☐ Disputed			
Debtor 2 only			T. (110.11			
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
At least one of the debtors ar	nd another		Student loans			
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	•		Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset	?		Other. Specify notice only			
☑ No ☐ Yes						
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Aaron's Inc			Last 4 digits of account number 8 4 6 4	s 1,2		
Nonpriority Creditor's Name				<u>عرا</u> \$		
2935 W 159th St			When was the debt incurred?			
Number Street Markham	IL	60420	As of the date you file, the claim is: Check all that apply.			
City	State	60428 ZIP Code				
		Mir Oddo	☐ Contingent☐ Unliquidated			
Who incurred the debt? Check	cone.		Disputed			
Debtor 1 only			,			
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
At least one of the debtors and	1 another		Student loans			
			Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a	- "		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Use			
Is the claim subject to offset?						
M No						
Yes	#71000000000000000000000000000000000000	Suff Lemant of Supract Comments of Supract Com				
Country Club Furniture			Last 4 digits of account number 8 3 1 5	_{\$1,03}		
Nonpriority Creditor's Name						
4051 W 183rd St			When was the debt incurred?			
Number Street Country Club Hills	IL	60478	As of the date you file, the claim is: Check all that apply.			
Dity	State	ZIP Code	Contingent			
Who incurred the debt? Check	one		Unfiguidated			
Debtor 1 only	OING.		☐ Disputed			
Debtor 2 only			Two of Management			
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
At least one of the debtors and	another		Student loans			
Check if this claim is for a c	community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts			
No			Other, Specify Credit use			

Part 2:

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 46 of 70 Page 4

9	Progressive Leasing			į	Last 4 digits of account number 1 3 9 7	4.005.0
	Nonpriority Creditor's Name 256 W Data Drive				When was the debt incurred?	_{\$1,035.0}
	Number Street				And the state of t	
	Draper City	UT	84020	•	As of the date you file, the claim is: Check all that apply.	
	City	State	ZiP Code		Contingent	
	Who incurred the debt? Check one.				Unliquidated Disputed	
	Debtor 1 only				Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only			1	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	.			☐ Student loans	
	☐ Check if this claim is for a commu				 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
		inity debt			Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			ŧ	Other. Specify Credit use	
	Yes					
]	Nonpriority Creditor's Name	ACCIDITATA PARAMETER SPECIFICAÇÃO	O Primer de de la mente per primer de la del mentre de presenta de la competitiva de la mentre de la competitiva de la mentre de la competitiva del la competitiva de la competitiva del la competitiva de la competitiva della competitiva de la competitiva della competitiva de la competitiva della comp	eroneine erene erene L	ast 4 digits of account number	s
	Nonpronty Cleditor's Name			V	When was the debt incurred?	
	Number Street			 A	s of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code		Contingent	
	Neth - Paris - Art				Unliquidated	
	Who incurred the debt? Check one.				Disputed	
	Debtor 1 only Debtor 2 only					
	Debtor 1 and Debtor 2 only				ype of NONPRIORITY unsecured claim:	
	At least one of the debtors and another				Student loans	
				_	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a commun	nity debt			Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offset?				Other. Specify	
	☑ No ☑ Yes					
]	alauru yang muuning ngapag at di anna arawa a profit lilamanin on ang baranan muu ang profit yana anna profit a	t betting geomotives to be established a continue of a suite of a continue of a contin	n etilisel Mervetta eti persilerilik eta ketikistik ki televisek persilerilik persilerilik eta ketika eta keti	La	etermination seusitementen en e	\$
ı	Nonpriority Creditor's Name			 Wi	hen was the debt incurred?	
ñ	lumber Street			<u>.</u>	of the date you file, the claim is: Check all that apply.	
č	ity	State	ZIP Code	· a		
1.	Mh- t				Unliquidated	
	Who incurred the debt? Check one.			ū	Disputed	
	Debtor 1 only Debtor 2 only			_		
	Debtor 2 only Debtor 1 and Debtor 2 only				pe of NONPRIORITY unsecured claim:	
Ū	At least one of the debtors and another				Student loans	
		· · · · · · · · · · · ·			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a communi	ny debt			Debts to pension or profit-sharing plans, and other similar debts	
	the claim subject to offset?				Other. Specify	
<u>_</u>] No] Yes					1

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 47 of 70 Page 47 of 30 Page 4

Part 3:

Middle Name

List Others to Be Notified About a Debt That You Already Listed

2, then list the collection agency here. S	be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the two additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
ARM/ Western Suburban Auto	On which entry in Part 1 or Part 2 did you list the original creditor?
910 West Van Buren St Ste 245	Line 44 of (Check one): Part 1: Creditors with Priority Unsecured Clain

910 West Van Buren	St Ste 245		Line 44 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	IL.	60607	Last 4 digits of account number 9 0 0 5
City	State	60607 ZIP Code	Arrana Appendix American
Account Receivable N	Management	territorium est entre in proprieta en est est en est e La companya en est	On which entry in Part 1 or Part 2 did you list the original creditor?
	Ct- 240A		
2950 W Chicago Ave	Sie 310A		Line 44 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Claims
Chicago	IL	60622	Last 4 digits of account number 0 3 0 2
City	State	ZIP Code	Last 4 digits of account number 0 3 0 2
Arnold Scott Harris/ C	city of Chicag	90	On which entry in Part 1 or Part 2 did you list the original creditor?
111 West Jackson Bl	vd Ste 600		Line 7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
Chicago	IL	COCO 4	
City	IL. State	60604 ZIP Code	Last 4 digits of account number 6 2 2 0
Creditors Discount & A	Audit/ Northy	vest Emerg	On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 213			Line 33 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Streator City	IL State	61364 ZIP Code	Last 4 digits of account number 7 5 5 5
Diversified Consultants	s Inc/ T-Mob	ile	On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 551268			
Number Street			Line 41 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville City	FL	32255	Last 4 digits of account number 6 9 5 5
Enhanced Recovery C	State o/ Comcast	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 57547 Number Street			Line 9 of (Check one): Depart 1: Creditors with Priority Unsecured Claims
Street Street			Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville City	FL	32241	Last 4 digits of account number 3 6 7 5
Enhanced Recovery Co	State	ZIP Code	
Name	JI COMCAST		On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 57547			Line 10 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
Jacksonville	FL	32241	Claims
City	State	ZIP Code	Last 4 digits of account number 2 0 3 7

Case 16-03207 Simone Robertson

Doc 1

Document

Page 48 of 70 Pa

Part 3:

Middle Name

List Others to Be Notified About a Debt That You Already Listed

Escallate/ EMP of Co	ok County		On which entry in Part 1 or Part 2 did you list the original creditor?
5200 Stoneham Rd			Line 13 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
North O			Last 4 digits of account number 0 5 5 9
North Canton	OH State	44720 ZIP Code	Last 4 digits of account number
Franklin Collection/ A	T&T		On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 3910			
Number Street			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	·		Claims Claims
Tupelo City	MS State	38803 ZIP Code	Last 4 digits of account number 1 9 2 9
Harris & Harris/ Franc	iscan St Jar	mes Health	On which entry in Part 1 or Part 2 did you list the original creditor?
111 West Jackson Blv	d Ste 600		Line 20 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
Chicago ^{City}	IL State	60604 ZIP Code	Last 4 digits of account number 1 5 2 2
I C Systems Collection	Carrier manager area of a reperturb to the first state of	and the second second second residence of the second secon	On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 64378			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
A			Claims
Saint Paul ^{Sity}	MN State	55164 ZIP Code	Last 4 digits of account number 9 0 0 1
Midland Funding MCM	/ T-Mobile		On which entry in Part 1 or Part 2 did you list the original creditor?
8875 Aero Dr Ste 200			Line 41 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
San Diego	CA	92123	
Dity many firem or more as a manufacture transmission or transmission of the contractive section of the contractive	State	ZIP Code	Last 4 digits of account number 1 4 1 1
Penn Credit/ PA Turnp	ike E-Zpass	***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?
O Box 988			Line 34 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street	· · · · · · · · · · · · · · · · · · ·		Part 2: Creditors with Nonpriority Unsecured
1			Claims
Harrisburg ity	PA State	17108 ZIP Code	Last 4 digits of account number 6 1 1 1
Senex Services/ Gary Mane	Methodist Ho	ospital	On which entry in Part 1 or Part 2 did you list the original creditor?
3333 Founders Rd 2nd	Floor		
umber Street	. 1001	,	Line 21 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Claims
ndianapolis	IN	46268	Last 4 digits of account number 9 9 N 1
ty	State	ZIP Code	Last 4 digits of account number 9 9 N 1

Case 16-03207 Simone Robertson

Document

Page 49 of 70 Case number (if known)

Last Name

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Doc 1

Trustmark Recovery Son			ons to be notified for any debts in Parts 1 or 2, list the consto be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?
541 Otis Bowen Dr			Line 30 of (Check analy [7] Danta Co. 19
Number Street			Line 30 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim
Munster	11.1	40004	Last 4 digits of account number 5 2 5 2
City	IN State	46321 ZIP Code	The Faight of decount number
Trustmark Recovery Se	ervice/		On which entry in Part 1 or Part 2 did you list the original creditor?
541 Otis Bowen Dr			
Number Street			Line 31 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Musotor	35.4		Claims
Munster Dity	IN State	46321 ZIP Code	Last 4 digits of account number 5 2 5 8
Trustmark Recovery Se	ervice/ St C	atherine's	On which entry in Part 1 or Part 2 did you list the original creditor?
541 Otis Bowen Dr			Line 37 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Munster	JN	46321	Last 4 digits of account number 1 2 8 0
ity			
Inited December 2	State	ZIP Code	The state of account number 1 2 0 0
United Recovery Servic	er konstruktion of the design of the second	and a company of the state of t	On which entry in Part 1 or Part 2 did you list the original creditor?
^{lane} 18525 Torrence Ave C-	e/ Methodi	and a company of the state of t	On which entry in Part 1 or Part 2 did you list the original creditor?
^{ame} 8525 Torrence Ave C-I	e/ Methodi	and a company of the state of t	
lame 18525 Torrence Ave C-lumber Street .ansing	e/ Methodi	and a company of the state of t	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
lame 18525 Torrence Ave C-0 umber Street ansing	e/ Methodi 6 IL	st Physician	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0
lame 18525 Torrence Ave C-lumber Street .ansing	e/ Methodi 6 IL	st Physician	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor?
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ame 18525 Torrence Ave C-lumber Street ansing ity	e/ Methodi 6 IL	st Physician	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
ame 18525 Torrence Ave Coumber Street ansing fity ame umber Street	e/ Methodi 6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ame 18525 Torrence Ave C-Cumber Street ansing ity ame umber Street	e/ Methodi 6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor?
ame 18525 Torrence Ave Coumber Street ansing fity ame umber Street	e/ Methodi 6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims
ame 18525 Torrence Ave C- umber Street ansing fity ame umber Street	e/ Methodi 6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims
ame 18525 Torrence Ave C-Cumber Street ansing ity ame umber Street	e/ Methodi 6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
ame 18525 Torrence Ave C- umber Street ansing fity ame umber Street	6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ame 18525 Torrence Ave C- umber Street ansing ity ame The Street Street Street	6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Last 4 digits of account number
ame 18525 Torrence Ave C- umber Street ansing ity ame mber Street	6 IL State	st Physician 60438 ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 0 0 1 0 On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor?

Case 16-03207 Simone Robertson

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 50 of 70

Part 4.

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total clain	
Total claims	6a	a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$	65,528.00
	60	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e	. Total. Add lines 6a through 6d.	6e.	\$	65,528.00
ty the traction				Total claim	
Total claims from Part 2	6f.	Student loans	6f.	\$	0.00
nom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. •	+ \$	29,229.00
	6j. ī	Fotal. Add lines 6f through 6i.	6j. [\$	29,229.00

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 51 of 70

Fill in this information		
	Robertson	
First Name	Middle Name Last N	ame
Debtor 2 N/A (Spouse If filing) First Name		
	Middle Name Last N	arne
United States Bankruptcy C	Court for the: Northern District of Illinois	
Case number		
(If known)		Check if this is an amended filing
Official Form 1	060	and the ang
		
Book complete and a	Executory Contracts	s and Unexpired Leases 12/15
 Do you have any extension No. Check this bo 	our name and case number (if known). ecutory contracts or unexpired leases? x and file this form with the court with your o	re filing together, both are equally responsible for supplying correct if it out, number the entries, and attach it to this page. On the top of any other schedules. You have nothing else to report on this form.
2. List separately each	person or company with when you have	leases are listed on Schedule A/B: Property (Official Form 106A/B).
example, rent, vehic unexpired leases.	e lease, cell phone). See the instructions f	the contract or lease. Then state what each contract or lease is for (for or this form in the instruction booklet for more examples of executory contracts and
·		·
Person or company	with whom you have the contract or lease	
	The state of least	State what the contract or lease is for
1		
Aaron's Inc		rental agreement/ used desktop
Name		non-residential
2935 W 159th Str	eet	
Number Street		MARIA III
Markham	IL 60428	
City	State ZIP Code	MANAGEMENT AND
? D	ende en de de de de la figure en en est de en en est en entre est de la decentra de formation de enfant fan en de en	
Progressive		rental agreement/ dinette
Name		non-residential
256 W Data Dr		
Number Street		MANAGA AND AND AND AND AND AND AND AND AND AN
Draper	UT 84020	
City second construction and approximate and a	State ZIP Code	
. .:		The state of the s
Name		The same and state in the same and state in the same and
		ALLA GATTI MALIAN PARTITALISMA TORONTO.
Number Street		
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City	State ZIP Code	
City Name	State ZIP Code	
City The Control of	State ZIP Code	
City Name Number Street		
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Name Number Street City Name		
Name Number Street		
Name Number Street City Name		

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 52 of 70

First Name Middle Name Last Mame	
Debtor 2 N/A	
Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number	
	Check if this is
fficial Form 10011	amended filing
fficial Form 106H	
chedule H: Your Codebtors	12/1
a number the entries in the boxes on the left. Attach the Additional se number (if known). Answer every question.	u may have. Be as complete and accurate as possible. If two married pe t information. If more space is needed, copy the Additional Page, fill it o Page to this page. On the top of any Additional Pages, write your name
Do you have any codebtors? (If you are filing a joint case, do not list	t aither coorse as a said-like
RA NO	courier spouse as a codebtor.)
Yes	
Within the last 8 years, have you lived in a community property st Arizona, California, Idaho, Louisiana, Nevada, New Meyico, Punto Ri	tate or territory? (Community property states and territories include
Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Ri No. Go to line 3.	ico, Texas, Washington, and Wisconsin.)
Yes. Did your spouse, former spouse, or legal equivalent live with	you of the time of
☐ No	you at the time?
Yes. In which community state or territory did you live?	. Fill in the name and current address of that person.
· · · · · · · · · · · · · · · · · · ·	
Name of your spouse, former spouse, or legal equivalent	
Harrie Ur your spouse, former shouse, or lengt equivalent	
Number Street	
	ZIP Code
Number Street City State	
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a green	e as a codebtor if your spouse is filing with you. List the person
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106D)	e as a codebtor if your spouse is filing with you. List the person
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Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2.	e as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt
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Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street	c as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line
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Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street City State	as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line ZIP Code
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street City State	as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line Schedule D, line Schedule D, line
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street City State	as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street City State	as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line Schedule D, line Schedule D, line
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street City State	as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line
Number Street City State In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor N/A Name Number Street City State	as a codebtor if your spouse is filing with you. List the person ator or cosigner. Make sure you have listed the creditor on E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 53 of 70 Fill in this information to identify your case: Simone Robertson Debtor 1 Middle Name Last Nam N/A Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is: (If known) ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job, attach a separate page with information about additional **Employment status Employed** Employed employers. ■ Not employed Not employed Include part-time, seasonal, or self-employed work. Personal Assistant Occupation Occupation may include student or homemaker, if it applies. Comptroller State of IL Employer's name Employer's address 201 Statehouse Number Street Number Street Springfield IL 62704 State ZIP Code City State ZIP Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 1,376.96 3. Estimate and list monthly overtime pay. 0.00 3. 4. Calculate gross income. Add line 2 + line 3. 1,376.96

Case 16-03207 Simone Robertson Document

Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 54 of 70

Case number (if known)

Debtor 1

First Name Middle Name

Last Name

		F	or Debtor 1	For De	btor 2 or ing spouse		
Copy line 4 here	. 🗲 4.	\$	1,376.96				
5. List all payroll deductions:				- *	····		
5a. Tax, Medicare, and Social Security deductions	5a.	•	220.40	٠.			
5b. Mandatory contributions for retirement plans	5b.	Ψ.	239.40	_			
5c. Voluntary contributions for retirement plans	5c.	-	0.00 0.00	_ `—	***		
5d. Required repayments of retirement fund loans			0.00	······································			
5e. Insurance	5d.	\$_		·			
5f. Domestic support obligations	5e.	\$_	0.00	-			
5g. Union dues	5f.	\$_	0.00	– Ψ <u>——</u>	····		
	5g.	\$_	0.00	\$	***************************************		
	5h.	+ \$_	0.00	<u>+ \$</u>			
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	1. 6.	\$	239.40	\$			
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,137.56	. \$			
8. List all other income regularly received:							
8a. Net income from rental property and from operating a business, profession, or farm							
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$			
8b. Interest and dividends	8b.	¢.	0.00	· · · · · · · · · · · · · · · · · · ·			
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		⊅_		,	· · · · · · · · · · · · · · · · · · ·		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	····		
8d. Unemployment compensation	8d.	\$	0.00	\$			
8e. Social Security	8e.	\$	829.00	\$			
8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	606.00	\$			
8g. Pension or retirement income				¥			
	8g.	\$	0.00	\$	····		
8h. Other monthly income. Specify:	8h.	+ \$	0.00	+ \$			
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	1,435.00	\$			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,572.56	+ \$	0.00	: \$	2,572.56
 State all other regular contributions to the expenses that you list in Sched 	 dule J.					L	
Include contributions from an unmarried partner, members of your household, y friends or relatives.	our de						
Do not include any amounts already included in lines 2-10 or amounts that are r	not ava	ilable	to pay expen	ses listed in S	chedule J.		
Specify:					11. 🛨	\$_	0.00
 Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain Si 	result is tatistica	s the o	combined mor	nthly income. pplies	12.	\$	2,572.56
13. Do you expect an increase or decrease within the year after you file this fo	orm?						bined thly income
✓ No.☐ Yes. Explain:			· · · · · · · · · · · · · · · · · · ·	······································	***************************************		

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 55 of 70 Document Fill in this information to identify your case: Simone Robertson Debtor 1 Check if this is: N/A Debtor 2 (Spouse, if filing) First Name An amended filing Middle Name Last Name A supplement showing postpetition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois • expenses as of the following date: Case number MM / DD / YYYY (If known) Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Your Household Part 1: 1. Is this a joint case? No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Dependent's relationship to Dependent's Do not list Debtor 1 and Does dependent live Yes. Fill out this information for Debtor 1 or Debtor 2 age with you? Debtor 2. each dependent..... Do not state the dependents' ☐ No son names. ✓ Yes No daughter Yes ☐ No No Yes ☐ No ☐ Yes 3. Do your expenses include **☑** No expenses of people other than Yes yourself and your dependents? **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061.) Your expenses 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 950,00 4. If not included in line 4: Real estate taxes 0.00 4a. 4h Property, homeowner's, or renter's insurance 0.00 4b. Home maintenance, repair, and upkeep expenses 40 4c. 0.00 Homeowner's association or condominium dues 0.00

4d.

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 56 of 70

Simone Robertson Debtor 1

First Name Middle Name

Last Name

Case number (if known)_

				xpenses
5	. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	. Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	140.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	642.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	75.00
10.	Personal care products and services	10.	\$	35.00
11,	Medical and dental expenses	11,	\$	4 = 65
12.	t and the state gas, mantenance, bas of train late.	,	Ψ	
	Do not include car payments.	12.	\$	208.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	130.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	400.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other, Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from			
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		¥	
	20a. Mortgages on other property		¢	0.00
	20b. Real estate taxes	20a.	\$	
	20c. Property, homeowner's, or renter's insurance	20b.	\$	
	20d. Maintenance, repair, and upkeep expenses	20c.	\$	2.00
	20e. Homeowner's association or condominium dues	20d.	\$	
		20e.	\$	0.00

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 57 of 70 Simone Robertson Debtor 1 Case number (if known) Last Name Other. Specify: 0.00 Calculate your monthly expenses. 22a. Add lines 4 through 21. 2,755.00 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 2,755.00 23. Calculate your monthly net income. 2,572.56 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. 2,755.00 Subtract your monthly expenses from your monthly income. 23c. -182.44The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? W No. ☐ Yes. Explain here:

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 58 of 70 Fill in this information to identify your case: Simone Robertson Debtor 1 First Name Middle Name N/A Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois • (If known) Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? **2** No Yes. Name of person_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. Signature of Debtor 2 Date MM / DD / YYYY

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 59 of 70 Fill in this information to identify your case: Simone Robertson Debtor 1 First Name N/A Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? ☐ Married ☑ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? ☐ No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: **Dates Debtor 1** Debtor 2: **Dates Debtor 2** lived there lived there ☐ Same as Debtor 1 Same as Debtor 1 991 Ellsworth Pl 10/01/2010 Number From Street Number Street 06/01/2015 To Gary IN 46404 State ZIP Code State ZIP Code Same as Debtor 1 Same as Debtor 1 From From __ Number Street Τo Τo City State ZIP Code City State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ☑ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

Explain the Sources of Your Income

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 60 of 70

Debto	r 1 Simone Robertson				
	First Name Middle Name	Last Name	Case n	umber (if known)	
ļ	Did you have any income from employn Fill in the total amount of income you rece if you are filing a joint case and you have in No Yes. Fill in the details.	ived iloni ali lods anti ali nits	けいしょくしょう かんけいりょう かっきょ	imaa aalii sittaa	elendar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year unti the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$1,318.07	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31,2015	Wages, commissions, bonuses, tips Operating a business	\$14,342.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before that: (January 1 to December 31,2014	Wages, commissions, bonuses, tips Operating a business	\$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
ga Li:	clude income regardless of whether that in nemployment, and other public benefit pay ambling and lottery winnings. If you are filing st each source and the gross income from No Yes. Fill in the details.	ng a joint case and you have	me; interest; dividends; income that you receive	money collected from law ed together, list it only onc	
	and detailed.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	snap s	606.00 ₋ 829.00 ₋		\$
		\$	-		\$
	For last calendar year:	snap \$	7,000.00		\$
	(January 1 to December 31,2015)	\$SSI \$ \$	9,948.00		\$ \$
	For the calendar year before that:	snap \$	700.00		•
	(January 1 to December 31 2014)	991	0.040.00	***************************************	\$

Entered 02/03/16 11:19:53 Case 16-03207 Doc 1 Filed 02/03/16

Document

Page 61 of 70

Debtor 1

Simone Robertson

ne	Middle	Name	l ast Name

Case number (# known)

Desc Main

			ж	ø	۰	ĕ
Ю	7	П	٠	В	c	ı

List Certain Payments You Made Before You Filed for Bankruptcy

140.	Neither Debtor 1 n "incurred by an indi	or Debtor	2 has primari	ly consumer de	ebts. Con	sumer debts are	define	d in 11 U.S.C. § 101	(8) as
	During the 90 days						6 225*	or more?	
	☐ No. Go to line 7				.,,		· • · · · · · · · · · · · · · · · · · ·	or more:	
			itar ta wham wa		# 0.00m4				
	Yes. List below total amou	nik you pail	a mai creditor, t	JO NOLINGILIAE N	avments t	are alteamoh 10	nort ob	diantions auch as	
	Cilia suppo	on and ann	nony. Also, do i	not include payr	nents to a	n attorney for th	is bank	ruptcy case.	
	* Subject to adjustm					es filed on or aft	er the c	late of adjustment.	
☑ Yes.	Debtor 1 or Debtor	· 2 or both	have primaril	y consumer de	bts.				
	During the 90 days	before you	i filed for bankn	uptcy, did you pa	ay any cre	ditor a total of \$	600 or	more?	
	No. Go to line 7.	-							
	Yes. List below of creditor. Do alimony. Al	O HOE HEGEL	AC DOMINGIES IO	r domestic supp nts to an attorned Dates of payment	ey for this	ione eilon ae al	uld sup	port and	Was this payment f
	Santander C	Consume	er USA	12/12/2015	\$	200.00	\$	11,998.00	☐ Mortgage
	8585 N Sten	nmons F	wv Ste 100						☑ Car
	Number Street								Credit card
									Loan repayment
	Dallas	TX	75247						Suppliers or vend
	City	State	ZIP Code						Other
	Candidada N				\$		\$		☐ Mortgage
	Cleditor's Name								☐ Car
	Creditor's Name								
	Number Street			w.c.					Credit card
				W					Credit card Loan repayment
				The state of the s					
		State	ZIP Code						Loan repayment
	Number Street	State	ZIP Code	***************************************					Loan repayment Suppliers or vend
	Number Street	State	ZIP Code		\$		\$		Loan repayment Suppliers or vend
	Number Street City	State	ZIP Code		\$		\$		Loan repayment Suppliers or vend Other
	Number Street City	State	ZIP Code		\$		\$	(AMA)	Loan repayment Suppliers or vend Other Mortgage
	Number Street City Creditor's Name	State	ZIP Code		\$		\$		Loan repayment Suppliers or vend Other Mortgage Car
	Number Street City Creditor's Name	State	ZIP Code		\$	1 TO ANN CONTRACTOR OF THE PARTY OF THE PART	\$		Loan repayment Suppliers or vend Other Mortgage Car Credit card

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 62 of 70 son

~	Simone	Roberts
Bohtor 1		LODGE

J.O. 1	First Name	Middle Name	Last Name				Case number (if known	7)
	PROPERTY OF THE STATE OF THE ST	hann kan dikupanan kan muga dikipajina si dikan kan sakan sanan sanan yang kapay kaya.						
corp age	porations of which porations of which ent, including one thas child suppo	ur relatives; any g ch you are an offi e for a business y	eneral partners; cer, director, per	relatives of an son in control,	y general or owner	al partners; er of 20% or	partnerships of which	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
		ments to an insid	er.					
				Dates of payment	To pa	tal amount d	Amount you still owe	Reason for this payment
	Insider's Name			~	. \$ <u> </u>		\$	
	Number Street			- 	-			
	City				_			1 4
	City	Star	te ZIP Code		¢		6 -	
	Insider's Name			***************************************	Φ		\$	
	Number Street							
	City	Stat	e ZIP Code	***************************************				
nclu	nsider? ide payments or No	e you filed for banded	ed or cosigned by		paymer	its or trans	fer any property o	n account of a debt that benefited
				Dates of payment	Tot pai	al amount d	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name				\$		\$	
	Number Street	**************************************						

	City	State	ZIP Code					

City

insider's Name

Number Street

State

ZIP Code

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 63 of 70

Debtor 1

Simone Robertson

First Name Middle Name Last Name Case number (# known)_______

List all such matters, including personal injury ca and contract disputes.	 were you a party in any lawsuit, court action, or administrative proce- ases, small claims actions, divorces, collection suits, paternity actions, supp 	eding? oort or custody modificat
u No		
Yes. Fill in the details.		
	Nature of the case Court or agency	Status of the case
Case title	Court Name	— Pending
		On appeal
	Number Street	Concluded
Case number		
	City State ZIP Code	
Cara Mila		
Case title	Court Name	Pending
		On appeal
	Number Street	Concluded
Case number		
	City State ZIP Code	·············
Yes. Fill in the information below.	Describe the property	taj užastostaju urastaju jaju u
Yes. Fill in the information below.	Describe the property Date	Value of the property
Yes. Fill in the information below. Creditor's Name	Describe the property	
	Describe the property	Value of the property
Creditor's Name	Describe the property Date Explain what happened	Value of the property
Creditor's Name	Describe the property Date Explain what happened Property was repossessed.	Value of the property
Creditor's Name Number Street	Explain what happened Property was repossessed.	Value of the property
Creditor's Name	Explain what happened Property was repossessed. Property was foreclosed.	Value of the property
Creditor's Name Number Street	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished.	Value of the property
Creditor's Name Number Street	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied.	Value of the property \$
Creditor's Name Number Street	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied.	Value of the property \$
Creditor's Name Number Street City State ZIP Code	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property Date	Value of the property \$
Creditor's Name Number Street City State ZIP Code Creditor's Name	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property Date	Value of the property \$
Creditor's Name Number Street City State ZIP Code Creditor's Name	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property Date Explain what happened Property was repossessed.	Value of the property \$
Creditor's Name Number Street City State ZIP Code Creditor's Name	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property Date	Value of the property \$

Simone Robertson Debtor 1 Case number (if known First Name Middle Name Last Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☑ No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you

Case 16-03207

Doc 1

Filed 02/03/16

Document

Entered 02/03/16 11:19:53

Page 64 of 70

Desc Main

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Page 65 of 70 Document Simone Robertson Debtor 1 Case number (# knd First Name Last Name 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☑ No $\ \square$ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? M No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred Value of property loss Include the amount that insurance has paid. List pending insurance lost claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☑ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 66 of 70

	Simone Robertson	Document	Page 6	6 of 70		
otor 1		t Name		Case number (if known)		
	mand self-globa framework of principles and self-self-self-self-self-self-self-self-	week				
		Description and value of	any property	transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					\$
						\$
	City State ZIP Code					
	Email or website address	-				
	Person Who Made the Payment, if Not You					
	in 1 year before you filed for bankrupto					
		Description and value of a	ny property	transferred	Date payment or A transfer was made	mount of payme
	Person Who Was Paid		54415A346		imade (1904) (1941) (1966)	
	Number Street					
					\$	
	City State ZIP Code					
Includ Do no	n 2 years before you filed for bankrupt ferred in the ordinary course of your be de both outright transfers and transfers mand transfers and transfers that you have to be seen the details.	ade as security (such as the	r s? e granting c			
		Description and value of pr			salah tahun salah s	Note that we have
_		transferred	operty	Describe any property or or debts paid in exchang	payments received le	Date transfer was made
P	erson Who Received Transfer					
Ñ	umber Street					
_						-
c	sty State ZIP Code					
Р	erson's relationship to you		***************************************			
Po	erson Who Received Transfer	•	•			en e
					:	**************************************
No	umber Street				:	

State

Person's relationship to you _

ZIP Code

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main

	Simone R	ohertson	Document	Page 67 01 70	
ebtor 1		Middle Name	Last Name	Case number (# known)	·

₩ No				
Yes. Fill in the details.				
	Description and value of the prop			Dog Stale Here Hall All A
	pescription and value of the propi	erty transferred		Date transfer was made
Name of twee				
Name of trust				
		Commence of the commence of th		
18: List Certain Financial Accoun	and the transfer of the transf	тим тамператы какинеттик предусти и минеторы д катиритур Тэграмдага дериниктор (Азацтория) им тампия в объедин	erry philosophia de productiva del l'opinio de l'opini	era kijapiliyah saamaan ar kalikada kahilida ayada, programa Ayssamad ahaya ahaya ahaya ahaya ahaya ahaya ahay
Within 1 year before you filed for bankrup closed, sold, moved, or transferred?	stcy, were any financial accounts o	or instruments held in ye	our name, or for your	benefit,
Include checking, savings, money market	L or other financial accounts: cort	ificatoe of donocit; char	aa la banka ili	•
oroxerage nouses, pension lungs, coope	ratives, associations, and other fir	meates of deposit; snar nancial institutions.	es in banks, credit un	ions,
☑ No				
Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or	Date account was	Last balance befo
		instrument	closed, sold, moved, or transferred	closing or transfe
Name of Financial Institution	-			
The state of the s	XXXX	Checking	<u> </u>	\$
Number Street		☐ Savings		
	•	Money market		
		☐ Brokerage		
City State ZiP Code		Other		
	. XXXX	Checking		•
Name of Financial Institution		Savings	**************************************	\$
Number Street		Money market		
		Brokerage		
		1 046		
City State ZIP Code		Other		
	year before you filed for bankrun		v or other depositence	.
o you now have, or did you have within 1 ecurities, cash, or other valuables?	year before you filed for bankrupt		x or other depository	for
o you now have, or did you have within 1 ecurities, cash, or other valuables?	year before you filed for bankrupt		x or other depository	for
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o you now have, or did you have within 1 ecurities, cash, or other valuables?	year before you filed for bankrupt Who else had access to it?		10.75 (0.85 (0.05)	Do you still
o you now have, or did you have within 1 ecurities, cash, or other valuables?	and the state of t	cy, any safe deposit bo	10.75 (0.85 (0.05)	Do you still have it?
o you now have, or did you have within 1 ecurities, cash, or other valuables?	Who else had access to it?	cy, any safe deposit bo	10.75 (0.85 (0.05)	Do you still have it? ☐ No
o you now have, or did you have within 1 ecurities, cash, or other valuables? I No I Yes. Fill in the details.	and the state of t	cy, any safe deposit bo	10.75 (0.85 (0.05)	Do you still have it?
o you now have, or did you have within 1 ecurities, cash, or other valuables? I No I Yes. Fill in the details.	Who else had access to it?	cy, any safe deposit bo	10.75 (0.85 (0.05)	Do you still have it? ☐ No

	Case 16-03 Simone Rober	rtcon		Filed 02/03/16 Document	Page 68 of 70		
		idle Name	Last	Name	Case number (if know	vn)	
			torage unit	or place other than you	home within 1 year before you f	iled for ba	nkruptcy?
Yes	s. Fill in the details	S.		to the second of the second	************		
				Who else has or had ac	ess to it? Describe the	contents	Do you have it
N	ame of Storage Facility			Name			□ No
	•			Halle			☐ Ye
N	umber Street			Number Street			:
							1 •
				City State ZIP Code			
Çi	ty	State	ZIP Code				:
		ny prop		r Control for Someon meone else owns? Incl	e Else ude any property you borrowed f	rom, are s	toring for,
you lold No	hold or control ar	ny proj one.				rom, are s	itoring for,
you lold No	i hold or control ar I in trust for some	ny proj one.					itoring for, Value
you lold No Yes	i hold or control ar I in trust for some	ny proj one.		meone else owns? incl	ude any property you borrowed f		STARRANT V V
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you noted No Yes	hold or control ar in trust for some s. Fill in the details mer's Name	ny proj one.	perty that so	meone else owns? Incl Where is the property?	ude any property you borrowed f		STARRANTI V V V
you note No Yes	hold or control are in trust for some of the following series. Fill in the details the more street.	ny propone.	ZIP Code	where is the property? Number Street	Describe the p		STARRANTI V V V
you noted No Yes	hold or control are in trust for some of in trust for some of the control of the	ny propone.	ZIP Code	where is the property? Number Street City sental Information	Describe the p		STARRANTI V V V
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you noted No Yes	hold or control are in trust for some of Part 10, the mental law means us or toxic substa	State About ne follo	ZIP Code Environme ederal, state, wastes, or n	Where is the property? Number Street City sental Information ions apply: or local statute or regulaterial into the air local	Describe the parties and concerning pollution, contents	Droperty	Value \$
you noted No Yes	hold or control are in trust for some of the intrust for some of Part 10, the mental law means ag statutes or regularity.	State About ne follo s any feances, valations	ZIP Code Environme Dwing definitederal, state, wastes, or me	Where is the property? Number Street City Sental Information ions apply: or local statute or regunaterial into the air, land the cleanup of these su	Describe the p	oroperty amination	\$

- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law	?
☑ No	•

Yes. Fill in the details.	Governmental unit	Environmental law, if you know it Date of notice
Name of site	Governmental unit	***************************************
Number Street	Number Street	
	City State ZIP Code	
City State ZIP Code		

Case 16-03207 Doc 1 Filed 02/03/16 Entered 02/03/16 11:19:53 Desc Main Document Page 69 of 70

Debtor 1 Simone

Simone	Robertson
First Name	Middle Name

Last Name

Case number (# known)

Number Street	Governmental unit Environm Governmental unit Number Street	nental law, if you know it	Date of notic
Number Street	Governmental unit	nental law, if you know it	Date of notic
Number Street	Governmental unit	a Nobel and All and Al	2410 0, 11000
Number Street			
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	Number Street		
· · · · · · · · · · · · · · · · · · ·	City State ZiP Code		
	City State ZIP Code		
City State ZIP Code			
e you been a party in any judicial or adm	inistrative proceeding under any environm	pental law? Include settlements and a	
No	and the state of t	contains and include settlements and c	raers.
Yes. Fill in the details.			
	Court or agency Natur	re of the case	Status of the
0	• • • • • • • • • • • • • • • • • • •		case
Case title	Court Name		☐ Pending
	Court Name		On appe
	Number Street		, <u>.</u>
			Conclude
Case number	City State ZIP Code		
A member of a limited liability compar	a trade, profession, or other activity, either ny (LLC) or limited liability partnership (LLI	r full-time or part-time P)	
→ A partner in a partnership			
An owner of at least 5% of the voting	or equity securities of a corporation		
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or 1	Simone Robertson First Name Middle Name Last Name Case number (if known)	
	Market and a second	
		Describe the nature of the business Employer Identification number
	Business Name	Do not include Social Security number or ITIN.
		EIN:
	Number Street	Name of accountant or bookkeeper Dates business existed
	City State ZIP Coc	From To
	only only	
A C	No /es. Fill in the details below.	Date issued
	Name	MM/DD/YYYY
	Number Street	
	City State ZIP Code	
12	Sign Below	
8 U	acia aic nac and confect i allasis	9E/N № N/A
		Signature of Debtor 2
	Date 02/03/2016	Date
_		r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
_	No Yes	

☑ No

Yes. Name of person____

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).